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| Fill in this information to identify your case: |  |                                      |
|---|--|--------------------------------------|
| United States Bankruptcy Court for the :        |  |                                      |
| NORTHERNDistrict ofILLINOIS(State)              |  |                                      |
| Case Number (If known):                         | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

# Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:            | Identify Yourself  |                            |   |
|--------------------|--|----------------------------|---|
|                    |  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your f          | full name  |                            |   |
| govern<br>identifi | he name that is on your<br>ment-issued picture<br>cation (for example, | Krystin First name Naomi   | First name                                    |
| your di<br>passpo  | river's license or ort).   | Middle name                | Middle name                                   |
| identifi           | our picture cation to your meeting e trustee.                          | Gooden Last name           | Last name                                     |
|                    |  | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. All otl         | her names you  |                            |   |
| have years         | used in the last 8   | First name                 | First name                                    |
|                    | e your married or<br>n names.  | Middle name                | Middle name                                   |
|                    |  | Last name                  | Last name                                     |
|                    |  | First name                 | First name                                    |
|                    |  | Middle name                | Middle name                                   |
|                    |  | Last name                  | Last name                                     |
| your \$            | the last 4 digits of<br>Social Security                                | xxx - xx - <u>7708</u>     | XXX - XX                                      |
| Individ            | er or federal<br>lual Taxpayer<br>ication number                       | OR                         | OR  |
| iueii(ii           | iodaon number  | <b>9</b> xx - xx           | <b>9</b> xx - xx                              |

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Document Gooden Krystin Naomi Debtor 1 Case Number (if known) \_

|                         |   | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):   |
|-------------------------|---|--|---|
| an<br>Ide<br>(El<br>the | ny business names ad Employer entification Numbers IN) you have used in e last 8 years clude trade names and bing business as names | Business name  Business name  EIN  EIN   | I have not used any business names or EINs.  Business name  Business name  EIN  EIN   |
| 5. <b>W</b> l           | here you live   | 6951 S. Oglesby  Number Street  Unit Apt 2C  | If Debtor 2 lives at a different address:  Number Street  |
|                         |   | Chicago IL 60649 City State ZIP Code  COOK County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | City State ZIP Code  County  If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address.            |
|                         |   | Number Street  P.O. Box  City State ZIP Code   | Number Street  P.O. Box  City State ZIP Code  |
| th                      | hy you are choosing<br>is district to file for<br>ankruptcy.  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  have another reason. Explain. (See 28 U.S.C. § 1408                  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408 |

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Debtor 1 Krystin Naomi Document Gooden Page 3 of 59

Case Number (if known)

| •                           | The chapter of the Bankruptcy Code you  | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |  |  |  |  |
|-----------------------------|---|---|--|--|--|--|
|                             | are choosing to file  | ☐ Chapter 7 ☐ Chapter 11  |  |  |  |  |
|                             | under   |   |  |  |  |  |
|                             |   | ☐ Chap  | ter 12   |  |  |  |
|                             |   | ■ Chap  | ter 13   |  |  |  |
| 3. How you will pay the fee |   | local<br>yours<br>subm<br>with  | court for more details<br>self, you may pay with<br>nitting your payment o<br>a pre-printed address. | about how you may pa<br>cash, cashier's check,<br>n your behalf, your atto   | lease check with the clerk's office in your ay. Typically, if you are paying the fee or money order. If your attorney is briney may pay with a credit card or check  |  |
|                             |   | _   |  | •  | se this option, sign and attach the nInstallments (Official Form 103A).  |  |
|                             |   | By la<br>less t<br>pay t  | w, a judge may, but is<br>than 150% of the offic<br>he fee in installments                           | not required to, waive<br>ial poverty line that app<br>If you choose this op | t this option only if you are filing for Chapter 7. your fee, and may do so only if your income is blies to your family size and you are unable to ion, you must fill out the <i>Application to Have the</i> and file it with your petition. |  |
| 9.                          | Have you filed for  | ■ No  |  |  |  |  |
|                             | bankruptcy within the   | _<br>   | None   |  |  |  |
|                             | last 8 years?   | ☐ Yes.  | District None  | When   | Case Number  |  |
|                             |   |   | District None  | Whon   | Case Number  |  |
|                             |   |   | District   | when   | MM / DD / YYYY   |  |
|                             |   |   |  |  |  |  |
|                             |   |   | District   | When   | Case Number  |  |
|                             |   |   | District   | When   | Case Number MM / DD / YYYY   |  |
| 0.                          | Are any bankruptcy cases pending or being   | ■ No  | District   | When   |  |  |
| 0.                          | cases pending or being filed by a spouse who is   | ■ No  |  |  | MM / DD / YYYY  Relationship to you  |  |
| 0.                          | cases pending or being<br>filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>parter, or by |   |  |  | MM / DD / YYYY   |  |
| 0.                          | cases pending or being<br>filed by a spouse who is<br>not filing this case with<br>you, or by a business                  |   | Debtor District  | When   | MM / DD / YYYY  Relationship to you Case Number, if known  MM / DD / YYYY  Relationship to you   |  |
| 0.                          | cases pending or being<br>filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>parter, or by |   | Debtor District  | When   | MM / DD / YYYY  Relationship to you Case Number, if known  MM / DD / YYYYY  Relationship to you Case Number, if known  |  |
| 0.                          | cases pending or being<br>filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>parter, or by |   | Debtor District  | When   | MM / DD / YYYY  Relationship to you Case Number, if known  MM / DD / YYYYY   |  |

| Debto | Case 16-340   | 12 Doc  | 1 Filed 10/25/1<br>Document   |   | Desc Main                           |
|-------|---|---|---|---|-------------------------------------|
|       | First Name  | Middle Name                                     | Last Name   |   |                                     |
| Par   | Report About Any Busin  | nesses You Own                                  | as a Sole Proprietor  |   |                                     |
| 12.   | Are you a sole proprietor of any full- or part-time business?  A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnerhsip, or LLC.  If you have more than one sole proprietorship, use a separate sheed and attach it to this petition.    | Yes.  | Go to Part 4.  Name and location of busin  Name of business, if any  Number Street  | ness  |                                     |
|       |   |   | ☐ Health Care Business ☐ Single Asset Real Es ☐ Stockbroker (as define  | State  to describe your business: s (as defined in 11 U.S.C. § 101(27A)) tate (as defined in 11 U.S.C. § 101(51B)) and in 11 U.S.C. § 101(53A)) as defined in 11 U.S.C. § 101(6))   | Zip Code                            |
| 13.   | Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business debtor?</i> For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).   | appropriate balance sh documents  No. I a la th | e deadlines. If you indicate to eet, statement of operations do not exist, follow the produce man filing under Chapter am filing under Chapter 11, e Bankruptcy Code.  am filing under Chapter 11 stankruptcy Code. | court must know whether you are a small business dithat you are a small business debtor, you must attach s, cash-flow statement, and federal income tax return cedure in 11 U.S.C. § 1116(1)(B).  11.  but I am NOT a small business debtor according to the and I am a small business debtor according to the de | your most recent or if any of these |
| 14.   | Do you own or have any property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | _   | /hat is the hazard?   | ded, why is it needed?  |                                     |

Number

City

Street

Where is the property? \_

ZIP Code

State

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Debtor 1

Krystin

Naomi

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Case Number (if known)

Part 5:

Explain Your Efforts to R

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|---|---|
| You must check one:   | You must check one:   |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  |
| ☐I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.  | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.   |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| I am not required to receive a briefing about credit counseling because of:   | I am not required to receive a briefing about credit counseling because of:   |
| Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  |
| Disability. My physical disability causes me to be unable to participate in a   | Disability. My physical disability causes me  |

briefing in person, by phone, or

through the internet, even after I

duty in a military combat zone.

reasonably tried to do so.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

briefing in person, by phone, or

through the internet, even after I

duty in a military combat zone.

reasonably tried to do so.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

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Case Number (if known)

|     | riist Name  | Mildule Name Last Name  |   |   |  |  |  |
|-----|---|---|---|---|--|--|--|
| Pa  | t 6: Answer These Questions   | for Reporting Purposes  |   |   |  |  |  |
| 16. | What kind of debts do you have?   | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.   |   |   |  |  |  |
|     |   | 16b. <b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  □No. Go to line 16c. |   |   |  |  |  |
|     |   | Yes. Go to line 17.   |   |   |  |  |  |
|     |   | Tec. State the type of debts you o  | owe that are not consumer debts or business   | debts.  |  |  |  |
| 17. | Are you filing under Chapter 7?   | No. I am not filing under C   | hapter 7. Go to line 18.  |   |  |  |  |
|     | Do you estimate that after<br>any exempt property is<br>excluded and<br>administrative expenses<br>are paid that funds will be<br>available for distribution<br>to unsecured creditors? | <b>—</b>  | ter 7. Do you estimate that after any exempt<br>es are paid that funds will be available to dist  |   |  |  |  |
| 18. | How many creditors do you estimate that you owe?  | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999   | ☐ 1,000-5,000<br>☐ 5,001-10,000<br>☐ 10,001-25,000  | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000  |  |  |  |
| 19. | How much do you estimate your assets to be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million   | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |  |  |  |
| 20. | How much do you<br>estimate your liabilities<br>to be?  | ■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million   | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million   | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |  |  |  |
| Pa  | t7: Sign Below  |   |   |   |  |  |  |
| For | you   | correct.  If I have chosen to file under Chap   | I declare under penalty of perjury that the in<br>oter 7, I am aware that I may proceed, if eligii<br>nderstand the relief available under each cha | ole, under Chapter 7, 11,12, or 13  |  |  |  |
|     |   |   | did not pay or agree to pay someone who is d read the notice required by 11 U.S.C. § 34   | ·   |  |  |  |
|     |   | I request relief in accordance with   | the chapter of title 11, United States Code, s  | specified in this petition.   |  |  |  |
|     |   | _   | ment, concealing property, or obtaining mone in fines up to \$250,000, or imprisonment for d 3571.  |   |  |  |  |
|     |   | /s/ Krystin Naomi Goo<br>Signature of Debtor 1  |   | nature of Debtor 2  |  |  |  |
|     |   | Executed on10/24/2010   | 6 Exe   | cuted on  |  |  |  |

Debtor 1

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| Debtor 1 | Krystin    | Naomi       | Gooden    | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
|          | First Name | Middle Name | Last Name |                        |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| ✗ /s/ Mariusz Krzysztof Zatorski          | Date     | Date: 10/24/20    | 16        |
|---|----------|-------------------|-----------|
| Signature of Attorney for Debtor          |          | MM / DD / YYYY    |           |
| Mariusz Krzysztof Zatorski                |          |                   |           |
| Printed name                              |          |                   |           |
| Geraci Law L.L.C.                         |          |                   |           |
| Firm name                                 |          |                   |           |
| 55 E. Monroe St., #3400                   |          |                   |           |
| Number Street                             |          |                   |           |
|   |          |                   |           |
|   |          |                   |           |
| Chicago                                   | IL       | 60603             |           |
|   | IL State | 60603<br>ZIP Code |           |
| Chicago  City  Contact Phone 312-332-1800 | State    |                   | cilaw.com |
| City                                      | State    | ZIP Code          | cilaw.com |
| City                                      | State    | ZIP Code          | cilaw.com |

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# Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1: | Summarize Your Assets  |                                      |
|---------|--|--------------------------------------|
|         |  | Your assets<br>Value of what you own |
|         | dule A/B: Property (Official Form 106A/B) topy line 55, Total real estate, from Schedule A/B   | \$0                                  |
| 1b. C   | opy line 62, Total personal property, from Schedule A/B  | \$ 3,050                             |
| 1c. C   | opy line 63, Total of all property on <i>Schedule A/B</i>  | \$ 3,050                             |
|         |  |                                      |
| Part 2: | Summarize Your Liabilities   |                                      |
|         |  | Your liabilities Amount you owe      |
|         | dule D: Creditors Who Have Claims Secured by Property (Official Form 106D) opy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | <u>**0</u>                           |
|         | dule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) opy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$0                                  |
| 3b. C   | opy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>  | \$22,839                             |
|         |  |                                      |
| Part 3: | Summarize Your Liabilities   |                                      |
|         | dule I: Your Income (Official Form 106I) y your combined monthly income from line 12 of Schedule I   | \$2,329.50                           |
|         | dule J: Your Expenses (Official Form 106J) y your monthly expenses from line 22c of Schedule J   | \$2,127.00                           |
|         |  |                                      |

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Debtor 1 Krystin Naomi Case Number (if known) \_

Page 9 of 59 Document First Name Middle Name Last Name **EntriesDescription AssetsAmount LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$ 2,353.33 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$ 0.00

\$ 0.00

\$ 0.00

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

|                              | Caco 1                                  | 3 2 4 0 1 2 Doc 1  | Filad 10/25/16                 | Entered 10/25/16 14:22:0   | 5 Des   | c Main           |            |
|------------------------------|---|--|--------------------------------|--|---------|------------------|------------|
| Fill in this in              | formation to ide                        | ntify your case and this filing  |                                | 0 of 59  |         |                  |            |
| Debtor 1                     | Krystin                                 | Naomi  | Gooden                         |  |         |                  |            |
| 5                            | First Name                              | Middle Name  | Last Name                      |  |         |                  |            |
| Debtor 2 (Spouse, if filing) | First Name                              | Middle Name  | Last Name                      |  |         |                  |            |
| United States                | Bankruptcy Court f                      | or the : <u>NORTHERN</u> District o  | f_ <u>ILLINOIS</u>             |  |         |                  |            |
| Case Number                  |   |  | (State)                        |  |         | Check if this i  | s an       |
| (If known)                   | 4004                                    | <b></b>  |                                |  |         | amended filin    | g          |
|                              | <u>orm 106A</u>                         |  |                                |  |         |                  |            |
|                              | e A/B: Pr                               |  |                                |  |         |                  | 12/15      |
|                              |   |  |                                | fits in more than one category, list the ass arried people are filing together, both are e |         |                  |            |
| =                            |   | ct information. If more space se number (if known). Answer                   |                                | te sheet to this form. On the top of any add   | itional |                  |            |
|                              |   | sidence, Building, Land, or Othe   |                                | ve an Interest In  |         |                  |            |
| r ear c in                   |   | egal or equitable interest in an   |                                |  |         |                  |            |
| No.                          |   |  |                                |  |         |                  |            |
| Yes.  2. Add the dol         | Describe lar value of the p             | portion you own for all of you   | r entries fro Part 1, includii | ng any entries for pages   |         |                  |            |
| you have at                  | tached for Part                         | 1. Write that number here  |                                | >  |         |                  | \$0.00     |
| Part 2:                      | Describe Your Ve                        | hicles   |                                |  |         |                  |            |
| Do you own, le               | ease, or have leg                       | al or equitable interest in any  | vehicles, whether they are     | e registered or not? Include any vehicles  |         |                  |            |
| =                            | _                                       | -  |                                | xecutory Contracts and Unexpired Leases.   |         |                  |            |
|                              | s, trucks, tractor                      | s, sport utility vehicles, motor   | cycles                         |  |         |                  |            |
| No.                          | Describe                                |  |                                |  |         |                  |            |
|                              |   | homes, ATVs and other recre<br>ors, personal watercraft, fishing ves         |                                |  |         |                  |            |
| No.                          | ,,                                      | , p  | ,,,,                           |  |         |                  |            |
| Yes. 5 Add the dol           |   | portion you own for all of you   | r entries fro Part 2. includir | ng any entries for pages   |         |                  |            |
|                              | -                                       | 2. Write that number here  |                                | >  |         |                  | \$ 0.00    |
| Part 3:                      | Describe Your Pe                        | rsonal and Household Items   |                                |  |         |                  |            |
|                              | r have any legal                        | or equitable interest in any of  | the following items?           |  |         | Current value of | the        |
| •                            | , ,                                     | ,  | ū                              |  |         | portion you own  |            |
|                              |   |  |                                |  |         | or exemptions    | red claims |
|                              | d goods and furr<br>Major appliances, f | <b>nishings</b><br>furniture, linens, china, kitchenware                     |                                |  |         |                  |            |
| No.                          |   |  |                                |  |         |                  |            |
| Yes.                         | Describe                                | Furniture, linens, small appliances  | s, table & chairs, bedroom set |  | \$1,200 |                  |            |
| 07. Electronic               | s                                       |  |                                |  |         | \$               | 1,200.00   |
|                              |   | dios; audio, video, stereo, and digita<br>including cell phones, cameras, me |                                | rs, scanners; music  |         |                  |            |
| No.                          | , ciccii ornic devices                  | micidality cell phones, cameras, me  | cuia piayers, garries          |  |         |                  |            |
| Yes.                         | Describe                                | TV, computer, printer, music colle   | ction, cell phone              |  | \$500   |                  |            |
| 08. Collectible              | s of value                              |  |                                |  |         | \$               | 500.00     |
| Examples:                    | Antiques and figuri                     | nes; paintings, prints, or other artwo                                       |                                | objects;   |         |                  |            |
| stamp, coir                  | n, or baseball card o                   | collections; other collections, memo   | rabilia, collectibles          |  |         |                  |            |
| Yes.                         | Describe                                |  |                                |  |         | \$               | 0.00       |
|                              |   |  |                                |  |         | Ψ                | 3.00       |

Official Form 106A/B Record # 721714 Schedule A/B: Property Page 1 of 6

Debtor 1 Krystin

Case 16-34012

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Desc Main

| First | Nan | ne |  |
|-------|-----|----|--|

Middle Name

| 09. | Examples:<br>and kayaks            |                               | hobbies  lic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes  lusical instruments   |          |  |
|-----|------------------------------------|-------------------------------|---|----------|--|
|     | No. Yes.                           | Describe                      |   |          | \$ 0.00  |
| 10. | Firearms Examples:                 | Pistols, rifles, shot         | guns, ammunition, and related equipment   |          | ş <u> 0.3</u> 0  |
|     | Yes.                               | Describe                      |   |          | \$0.00   |
| 11. | Clothes Examples: No.              | Everyday clothes,             | furs, leather coats, designer wear, shoes, accessories  |          |  |
|     | Yes.                               | Describe                      | Everyday clothes  | \$100    | \$ <u> </u>  |
| 12. | Jewelry Examples: gold, silver No. | Everyday jewelry,             | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,  |          |  |
|     | Yes.                               | Describe                      | Everyday jewelry, costume jewelry   | \$150    | \$ <u>150.0</u> 0  |
| 13. | Non-farm a Examples:               | animals<br>Dogs, cats, birds, | norses  |          |  |
|     | Yes.                               | Describe                      |   |          | \$0.00   |
| 14. | Any other No.                      | personal and h                | ousehold items you did not already list, including any health aids you did not list   |          |  |
|     | Yes.                               | Describe                      | Books, CDs, DVDs & Family Photos  | \$100    | \$ 100.00  |
|     |                                    |                               | of your entries from Part 3, including any entries for pages you have attached er here  | ->       | \$2,050.00   |
|     |                                    | Describe Your Fir             |   | <u> </u> |  |
|     |                                    | r have any legal              | or equitable interest in any of the following?  |          | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 16. | Examples: No. Yes.                 | Money you have in             | your wallet, in your home, in a safe deposit box, and on hand when you file your petition   |          |  |
| 17  | Deposits of                        |                               |   |          | \$0.00   |
| ••• | Examples:                          | Checking, savings             | or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, f you have multiple accounts with the same institution, list each. |          |  |
|     | Yes.                               | Describe                      | Account Type: Institution name: Checking Account PNC  |          | \$0.00<br>\$000  |
| 18. |                                    |                               | ublicly traded stocks ment accounts with brokerage firms, money market accounts   |          | \$ <u> </u>  |
|     | Yes.                               | Describe                      | Institution or issuer name:   |          | \$ 0.00  |
| 19. | Non-public                         | cly traded stock              | and interests in incorporated and unincorporated businesses, including an interest in   |          | <u> </u>   |
|     | Yes.                               | Describe                      | Name of Entity and Percent of Ownership:  |          | \$0.00   |

Debtor 1

Case 16-34012 Krystin

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Desc Main

First Name Middle Name

| Fileu        | L. TU/ | 231. | ΤО |
|--------------|--------|------|----|
| rijeu        | den    |      |    |
| $-$ D $_{0}$ | cum    | ent  |    |
| Last N       | iame   |      |    |

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| 20. | Negotiable i              | nstruments includ                   | e bonds and other negotiable and non-negotiable instruments e personal checks, cashiers' checks, promissory notes, and money orders. re those you cannot transfer to someone by signing or delivering them. |  |              |
|-----|---------------------------|-------------------------------------|---|--|--------------|
|     | No. Yes.                  | Describe                            | Issuer name:  | •  | 0.00         |
| 21. |                           | or pension acc                      | counts  RISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans  | \$   | 0.00         |
|     | Yes.                      | Describe                            | Type of account and Institution name:   | \$   | 0.00         |
| 22. | Your share                |                                     | payments sits you have made so that you may continue service or use from a company andlords, prepaid rent, public utilities (electric, gas, water), telecommunications                                      | <u> </u>   |              |
|     | Yes.                      | Describe                            | Institution name or individual:   | \$   | 0.00         |
| 23. | Annuities (               | A contract for a                    | periodic payment of money to you, either for life or for a number of years)   |  |              |
|     | Yes.                      | Describe                            | Issuer name and description:  | \$   | 0.00         |
| 24. |                           | an education I<br>§ 530(b)(1), 529A | RA, in an account in a qualified ABLE program, or under a qualified state tuition program. (b), and 529(b)(1).  | <b>-</b>   |              |
|     | Yes.                      | Describe                            | Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):  | •  | 0.00         |
| 25. | Trusts, equ               | itable or future                    | interests in property (other than anything listed in line 1), and rights or powers  | <b>\$</b>  | <u>0.0</u> 0 |
|     | Yes.                      | Describe                            |   | \$   | 0.00         |
| 26. |                           |                                     | marks, trade secrets, and other intellectual property mes, websites, proceeds from royalties and licensing agreements   |  |              |
|     | Yes.                      | Describe                            |   | \$   | 0.00         |
| 27. |                           |                                     | other general intangibles xclusive licenses, cooperative association holdings, liquor licenses, professional licenses   |  |              |
|     | Yes.                      | Describe                            |   | \$   | 0.00         |
| Mor | ney or prope              | erty owed to yo                     | u?  | Current value of the portion you own? Do not deduct secured clai or exemptions | ims          |
| 28. | Tax refunds               | s owed to you                       |   |  |              |
|     | Yes.                      | Describe                            |   | \$   | 0.00         |
| 29. | Family sup<br>Examples: F | •                                   | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement  | <b>-</b>   |              |
|     | Yes.                      | Describe                            |   | \$   | 0.00         |
| 30. | Examples: l               |                                     | bwes you ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, id loans you made to someone else  | <b>V</b>   |              |
|     | Yes.                      | Describe                            |   | \$   | 0.00         |

Debtor 1

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Doc 1

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Desc Main

<del>Document</del> 31. Interest in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No. Company Name & Beneficiary: Yes Describe..... Term life insurance 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No. Yes. Describe..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No. Yes. Describe..... 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights Yes. Describe..... 0.00 35. Any financial assets you did not already list No. Describe..... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$0.00 for Part 4. Write that number here ---> Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Yes Current value of the portion you own? Do not deduct secured claims or exemptions 38. Accounts receivable or commissions you already earned No. Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Yes. Describe..... \$1,000 Flat irons, blow dryers, scissors, towels, chemicals, etc. 1,000.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Describe..... 0.00 41. Inventory No. Yes. Describe..... 0.00 42. Interests in partnerships or joint ventures Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations No. Yes. Describe..... 0.00

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44. Any business-related property you did not already list Nο Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 1000.00 for Part 5. Write that number here ..... Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Yes. Describe..... 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Describe..... 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe..... 0.00 50. Farm and fishing supplies, chemicals, and feed Yes. Describe..... 0.00 51. Any farm- and commercial fishing-related property you did not already list Yes Describe..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached \$0.00 for Part 6. Write that number here ----Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Describe..... Yes. 0.00 \$0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... -->

Debtor 1

Krystin

Case 16-34012

Doc 1

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Desc Main

First Name

Middle Name

| Part 8: List the Totals of Each Part of this Form                |             |             |
|--|-------------|-------------|
| 55. Part 1: Total real estate, line 2                            |             | \$ 0.00     |
| 56. Part 2: Total vehicles, line 5                               | \$ 0.00     |             |
| 57. Part 3: Total personal and household items, line 15          | \$ 2,050.00 |             |
| 58. Part 4: Total financial assets, line 36                      | \$ 0.00     |             |
| 59. Part 5: Total business-related property, line 45             | \$ 1,000.00 |             |
| 60. Part 6: Total farm- and fishing-related property, line 52    | \$ 0.00     |             |
| 61. Part 7: Total other property not listed, line 54             | \$ 0.00     |             |
| 62. Total personal property. Add lines 56 through 61             | \$ 3,050.00 | \$ 3,050.00 |
|  |             |             |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 |             | \$3,050.00  |

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| Fill in this in     | formation to ident   | ify your case:                        |                     |
|---------------------|----------------------|---------------------------------------|---------------------|
| Debtor 1            | Krystin              | Naomi                                 | Gooden              |
|                     | First Name           | Middle Name                           | Last Name           |
| Debtor 2            |                      |                                       |                     |
| (Spouse, if filing) | First Name           | Middle Name                           | Last Name           |
| United States       | Bankruptcy Court for | the : <u>NORTHERN</u> District of _   | ILLINOIS<br>(State) |
| Case Number         | r                    | · · · · · · · · · · · · · · · · · · · | _                   |
| (If known)          |                      |                                       |                     |

# Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

|   | emptions are you claiming? Check                                 |                                     |   |                                    |  |  |  |
|---|--|-------------------------------------|---|------------------------------------|--|--|--|
| _   | ming state and federal nonbankrupt                               |                                     | § 522(D)(3)   |                                    |  |  |  |
| You are clair   | ming federal exemptions. 11 U.S.C.                               | § 522(b)(2)                         |   |                                    |  |  |  |
| . For any propert   | y you list on <i>Schedule A/B</i> that yo                        | u claim as exempt, fill in t        | the information below.  |                                    |  |  |  |
| ·   | Brief description of the property and line on                    |                                     |   |                                    |  |  |  |
|   |  | Copy the value from<br>Schedule A/B | Check only one box for each exemption                           |                                    |  |  |  |
| Brief description:  | Furniture, linens, small appliances, table & chairs, bedroom set | \$_1,200                            | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$1,200.00 |  |  |  |
| Line from Schedule A/B:   | 06   |                                     | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |
| Brief<br>description:   | TV, computer, printer, music collection, cell phone              | \$_500                              | <b></b>   | 735 ILCS 5/12-1001(b) - \$500.00   |  |  |  |
| Line from Schedule A/B:   | 07   |                                     | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |
| Brief description:  | Everyday clothes   | \$_ 100                             | <b>\$</b>   | 735 ILCS 5/12-1001(b) - \$100.00   |  |  |  |
| Line from Schedule A/B:   | <u>11</u>  |                                     | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |
| Brief<br>description:   | Everyday jewelry, costume jewelry                                | \$ <u>150</u>                       | <b></b>   | 735 ILCS 5/12-1001(b) - \$150.00   |  |  |  |
| Line from Schedule A/B:   | 12   |                                     | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |
|   |  |                                     |   |                                    |  |  |  |
| Official Form 106C Record # 721714 Schedule C: The Property You Claim as Exempt Page 1 of 2 |  |                                     |   |                                    |  |  |  |

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Dogument

Page 17 of 59 Number (if known) Debtor 1 Krystin Naomi Last Name First Name Middle Name

|   | Part 2# Addit   | ional Page  |  |   |                                    |
|---|---|---|--|---|------------------------------------|
|   | Brief description of the property and line on Schedule A/B that lists this property |   | n Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |
|   |   |   | Copy the value from<br>Schedule A/B    | Check only one box for each exemption                           |                                    |
|   | Brief description:  | Books, CDs, DVDs & Family Photos                        | \$_100                                 | <b></b> \$  | 735 ILCS 5/12-1001(a) - \$100.00   |
|   | Line from Schedule A/B:   | 14  |  | 100% of fair market value, up to any applicable statutory limit |                                    |
|   | Brief description:  | Checking Account, PNC, 0.0                              | \$_0                                   | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$0.00     |
|   | Line from Schedule A/B:   | <u>17</u>   |  | 100% of fair market value, up to any applicable statutory limit |                                    |
|   | Brief description:  | Term life insurance                                     | \$_0                                   | <b></b>   | 215 ILCS 5/238 - \$0.00            |
|   | Line from Schedule A/B:   | 31  |  | 100% of fair market value, up to any applicable statutory limit |                                    |
|   | Brief description:  | Flat irons, blow dryers, scisso towels, chemicals, etc. | ors,<br>\$_1,000                       | \$ 1,500  | 735 ILCS 5/12-1001(d) - \$1,500.00 |
|   | Line from Schedule A/B:   | 39  |  | 100% of fair market value, up to any applicable statutory limit |                                    |
|   | Yes. Did you  No Yes.   | acquire the property cover                              | ed by the exemption within 1,215 o     | days before you filed this case?                                |                                    |
|   |   |   |  |   |                                    |
|   |   |   |  |   |                                    |
|   |   |   |  |   |                                    |
|   |   |   |  |   |                                    |
|   |   |   |  |   |                                    |
|   |   |   |  |   |                                    |
|   |   |   |  |   |                                    |
|   |   |   |  |   |                                    |
|   |   |   |  |   |                                    |
|   |   |   |  |   |                                    |
| 0 | fficial Form 1060   | Record # 72   | 1714 Schadula C: T                     | he Property You Claim as Exempt                                 | Page 2 of 2                        |

| Fill        | in this in                         | Case 16                 |  | Filed 10/25/16                |              | ed 10/25/16<br>3 of 59 | 6 14:22:05   | Desc Main  |                                |
|-------------|------------------------------------|-------------------------|--|-------------------------------|--------------|------------------------|--|--|--------------------------------|
|             | btor 1                             | Krystin                 | Naomi  | Gooden                        |              | 5 01 59                |  |  |                                |
| Del         | btor 2                             | First Name              | Middle Name  | Last Name                     |              |                        |  |  |                                |
| (Spo        | ouse, if filing)                   | First Name              | Middle Name  | Last Name                     |              |                        |  |  |                                |
| Ca          | ited States<br>se Number<br>known) |                         | ne: <u>NORTHERN</u> District of _  | ILLINOIS(State)               |              |                        |  | Check if this                                      |                                |
|             |                                    | orm 106D  D: Creditor   | s Who Have Clain   | ns Secured by F               | Property     | /                      |  |  | 12/15                          |
| nform       | ation. If n                        | nore space is need      | ossible. If two married people<br>ed, copy the Additional Page<br>and case number (if known).      | e, fill it out, number the e  |              |                        |  | у  |                                |
| 1. <b>D</b> | any cred                           | ditors have claims      | secured by your property?  |                               |              |                        |  |  |                                |
|             | No. Ch                             | eck this box and sul    | bmit this form to the court with   | your other schedules. Yo      | ou have noth | ing else to report     | on this form.  |  |                                |
| L           | Yes. Fill                          | I in all of the informa | ation below.   |                               |              |                        |  |  |                                |
| Par         | t 1:                               | ist All Secured Clain   | ms   |                               |              |                        |  |  |                                |
|             | int all and                        | 16 0 00                 |  | d alaine liet the anadite     |              |                        | Column A   | Column A   | Column C                       |
| fo          | or each cla                        | aim. If more than or    | editor has more than one sec<br>ne creditor has a particular cla<br>laims in alphabetical order ac | aim, list the other creditors | s in Part 2. |                        | Amount of claim  Do not deduct the value of collateral | Value of collateral<br>that supports this<br>claim | Unsecured<br>portion<br>If any |
|             |                                    |                         |  |                               |              |                        |  |  |                                |
|             |                                    |                         |  |                               |              |                        |  |  |                                |
|             |                                    |                         |  |                               |              |                        |  |  |                                |

|  |  | Caso 16 3   |  | 1 Filad 10/25/16   | Entered 10/25/16 14:22:05  | Desc Main                   | l                          |
|--|--|---|--|--|--|-----------------------------|----------------------------|
| Fill                                       | l in this in   | formation to identify   | y your case:   |  | 9 of 59  |                             |                            |
| De   | ebtor 1  | Krystin   | Naomi  | Gooden   |  |                             |                            |
|  |  | First Name  | Middle Name  | Last Name  |  |                             |                            |
| De   | ebtor 2  |   |  |  |  |                             |                            |
| (Sp  | ouse, if filing)   | First Name  | Middle Name  | Last Name  |  |                             |                            |
| Ur   | nited States   | Bankruptcy Court for th   | e: <u>NORTHERN</u> Di  | strict of <u>ILLINOIS</u>  |  |                             |                            |
| 0-   | November   | _   |  | (State)  |  | ☐Check i                    | f this is an               |
|  | se Number<br>known)  |   |  |  |  | amende                      |                            |
| ⊃ffi                                       | cial E   | orm 106E/F  |  |  |  |                             | o .                        |
| וווע                                       | Ciai i   | OIIII 100L/I  |  |  |  |                             | 40/45                      |
| <u>ich</u>                                 | <u>edule</u>   | E/F: Credito  | rs Who Have  | Unsecured Claims   |  |                             | 12/15                      |
| ist th<br>I/B: F<br>redit<br>eede<br>op of | ne other p<br>Property (<br>ors with p<br>ed, copy the<br>any addi | arty to any executor<br>Official Form 106A/E<br>partially secured clai<br>he Part you need, fill<br>tional pages, write y | y contracts or unexp<br>3) and on <i>Schedule</i> (<br>ms that are listed in   | pired leases that could result in a<br>G: Executory Contracts and Une<br>Schedule D: Creditors Who Have<br>entries in the boxes on the left. A<br>number (if known). | s and Part 2 for creditors with NONPRIORITY cl<br>a claim. Also list executory contracts on Sched<br>expired Leases (Official Form 106G). Do not incl<br>re Claims Secured by Property. If more space is<br>extract the Continuation Page to this page. On the | ule<br>lude any<br>s        |                            |
|  |  |   |  |  |  |                             |                            |
| 1. D                                       | o any cre<br>_   | ditors have priority  | unsecured claims ag  | gainst you?  |  |                             |                            |
|  | No. Go   | to Part 2.  |  |  |  |                             |                            |
| L  | Yes.   |   |  |  |  |                             |                            |
| e<br>n<br>u                                | ach claim<br>onpriority<br>nsecured                                | listed, identify what t<br>amounts. As much a<br>claims, fill out the Co  | ype of claim it is. If a<br>s possible, list the cla<br>entinuation Page of Pa | claim has both priority and nonpri   | ecured claim, list the creditor separately for each<br>iority amounts, list that claim here and show both<br>ng to the creditor's name. If you have more than t<br>lds a particular claim, list the other creditors in Pa<br>action booklet.)                  | priority and<br>wo priority |                            |
| (-   | 0. 0 0   | oraniament en eden type   | , o. c.a, eee a.ee   |  | Total claim  | Priority                    | Nonpriority                |
|  |  |   |  |  |  | amount                      | amount                     |
| Pa   | rt 2:  | List All of Your NONP   | RIORITY Unsecured C  | claims   |  |                             |                            |
| 3. <b>D</b>                                | o any cre  | ditors have nonprior  | rity unsecured claim   | s against you?   |  |                             |                            |
|  | No. Yo   | ou have nothing to rep  | port in this part. Subr  | mit this form to the court with your   | other schedules.   |                             |                            |
|  | Yes.   |   |  |  |  |                             |                            |
| n<br>ir                                    | onpriority<br>ncluded in   | unsecured claim, list   | the creditor separate<br>one creditor holds a p                                | ly for each claim. For each claim  | or who holds each claim. If a creditor has more to<br>listed, identify what type of claim it is. Do not list of<br>itors in Part 3.If you have more than three nonprior  | claims already              |                            |
|  | <b>]</b> AT&T  |   |  | Look A dimite of account mumbers   |  |                             | Total claim<br>\$ 1,000.00 |
| 4.1  | Creditor's   | Name  |  | Last 4 digits of account number  |  |                             | Ψ,,σσσ.σσ                  |
|  | PO Box   | 8212  |  | When was the debt incurred?  |  |                             |                            |
|  | Number   | Street  |  |  |  |                             |                            |
|  |  |   |  | As of the date you file, the claim   | is: Check all that apply.  |                             |                            |
|  | Aurora   |   | IL 60572-8212  | Contingent   |  |                             |                            |
|  | City   |   | State Zip Code   | Unliquidated Disputed  |  |                             |                            |
|  | _  | the debt? Check one.  |  | Disputed   |  |                             |                            |
|  | Debtor Debtor  | •   |  | Type of NONPRIORITY unsecure   | d claim:   |                             |                            |
|  | =  | 1 and Debtor 2 only   |  | Student loans  | a Jann.  |                             |                            |
|  | =  | one of the debtors and  | another  | Obligations arising out of a separ   | ration agreement or divorce  |                             |                            |
|  | =  | if this claim relates to  |  | that you did not report as priority  | claims   |                             |                            |
|  | comm   | unity debt  |  | Debts to pension or profit-sharing   | g plans, and other similar debts   |                             |                            |
|  | Is the clair   | m subject to offest?  |  | Other Control   Little Dill- /Other  | ollular Sarvica  |                             |                            |
|  | Yes  |   |  | Other. Specify Utility Bills/Co  | ellular Service  |                             |                            |

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Page 20 of 59 **Document** Krystin Naomi Debtor 1

Your NONPRIORITY Unsecured Claims - Continuation Page

| After I | isting any entries on this page, number them be    | ginning with 4.4, followed by 4.5, and so forth.                               | Total Claim         |
|---------|--|--|---------------------|
| 4.2     | Chicago Acceptance Corporation                     | Last 4 digits of account number  | <b>\$</b> _4,000.00 |
|         | Creditor's Name                                    | <del></del>  |                     |
|         | PO Box 5589  | When was the debt incurred?  |                     |
|         | Number Street                                      |  |                     |
|         | -  | As of the date you file, the claim is: Check all that apply.                   |                     |
|         | Buffalo Grove IL 60089                             | Contingent   |                     |
|         | City State Zip Code                                | Unliquidated   |                     |
| '       | Who owes the debt? Check one.                      | Disputed   |                     |
|         | Debtor 1 only                                      |  |                     |
|         | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                     |
|         | Debtor 1 and Debtor 2 only                         | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce |                     |
|         | At least one of the debtors and another            | that you did not report as priority claims                                     |                     |
|         | Check if this claim relates to a community debt    | Debts to pension or profit-sharing plans, and other similar debts              |                     |
|         | ls the claim subject to offest?                    |  |                     |
|         | No   | Other. Specify Deficiency, Repo'd/Surr'd Auto                                  |                     |
|         | Yes City of Chicago Bureau Parking                 |  | <b>\$</b> 3,000.00  |
| 4.3     | Creditor's Name                                    | Last 4 digits of account number  | \$ 3,000.00         |
|         | 121 N. LaSalle St                                  | When was the debt incurred?  |                     |
|         | Number Street                                      |  |                     |
|         | Room 107   | As of the date you file, the claim is: Check all that apply.                   |                     |
|         |  | Contingent   |                     |
|         | Chicago IL 60602                                   | Unliquidated   |                     |
| ,       | City State Zip Code  Who owes the debt? Check one. | Disputed   |                     |
|         | Debtor 1 only                                      |  |                     |
|         | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                     |
|         | Debtor 1 and Debtor 2 only                         | Student loans  |                     |
|         | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce                   |                     |
|         | Check if this claim relates to a                   | that you did not report as priority claims                                     |                     |
|         | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts              |                     |
|         | Is the claim subject to offest?                    | Ditt Own d   |                     |
|         | No Yes   | Other. Specify Debt Owed   |                     |
| 4.4     | COMENITY BANK/Vctrssec                             | Last 4 digits of account number NULL   | \$ <u>466.00</u>    |
|         | Creditor's Name                                    | 2045.0040  |                     |
|         | Po Box 182789                                      | When was the debt incurred? 2015-2016  |                     |
|         | Number Street                                      |  |                     |
|         |  | As of the date you file, the claim is: Check all that apply.                   |                     |
|         | Columbus OH 43218                                  | Contingent   |                     |
|         | City State Zip Code                                | Unliquidated   |                     |
| '       | Who owes the debt? Check one.                      | Disputed   |                     |
|         | Debtor 1 only                                      |  |                     |
|         | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:   |                     |
|         | Debtor 1 and Debtor 2 only                         | ☐ Student loans  |                     |
|         | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce                   |                     |
|         | Check if this claim relates to a                   | that you did not report as priority claims                                     |                     |
|         | community debt Is the claim subject to offest?     | Debts to pension or profit-sharing plans, and other similar debts              |                     |
|         | No   | Other. Specify Credit Card or Credit Use                                       |                     |
|         | Yes  |  |                     |

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|--|---|---------------|-------|-----------------|--------------------------------------|--|--|--|--|
| Debtor 1   | Krystin   | Naomi         |       | <b>Document</b> | Page 21 of 59 Case Number (if known) |  |  |  |  |
|  | First Name  | Middle Name   |       | Last Name       |                                      |  |  |  |  |
| Part 2   | Part 2+ Your NONPRIORITY Unsecured Claims - Continuation Page |               |       |                 |                                      |  |  |  |  |
| After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. |   |               |       |                 |                                      |  |  |  |  |
|  |   |               |       |                 |                                      |  |  |  |  |

| After li | sting any entries on this page, number them be     | eginning with 4.4, followed by 4.5, and so forth.                 | Total Claim        |  |  |  |  |
|----------|--|---|--------------------|--|--|--|--|
| 4.5      | Commonwealth Edison                                | Last 4 digits of account number                                   | \$ <u>200.00</u>   |  |  |  |  |
|          | Creditor's Name                                    | When the debt in sum d?   |                    |  |  |  |  |
|          | 3 Lincoln Center 4th Floor                         | When was the debt incurred?                                       |                    |  |  |  |  |
|          | Number Street                                      |   |                    |  |  |  |  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |  |  |  |  |
|          | Onlinearly Tarrana III CO404                       | Contingent  |                    |  |  |  |  |
|          | Oakbrook Terrace IL 60181  City State Zip Code     | Unliquidated  |                    |  |  |  |  |
| v        | City State Zip Code  Vho owes the debt? Check one. | Disputed  |                    |  |  |  |  |
| [        | Debtor 1 only                                      |   |                    |  |  |  |  |
| Ī        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |  |  |  |  |
| Ī        | Debtor 1 and Debtor 2 only                         | Student loans   |                    |  |  |  |  |
| Ī        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |  |  |  |  |
| l i      | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |  |  |  |  |
|          | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                    |  |  |  |  |
| 19       | s the claim subject to offest?                     |   |                    |  |  |  |  |
|          | No   | Other. Specify Utility Bills/Cellular Service                     |                    |  |  |  |  |
|          | Yes  | — NUU   | 447.00             |  |  |  |  |
| 4.6      | First Premier BANK                                 | Last 4 digits of account number NULL                              | <b>\$</b> 447.00   |  |  |  |  |
|          | Creditor's Name                                    | When was the debt incurred? 2015-2016                             |                    |  |  |  |  |
|          | 601 S Minnesota Ave                                | When was the debt incurred?                                       |                    |  |  |  |  |
|          | Number Street                                      |   |                    |  |  |  |  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |  |  |  |  |
|          | Sioux Falls SD 57104                               | Contingent  |                    |  |  |  |  |
|          | City State Zip Code                                | Unliquidated  |                    |  |  |  |  |
| v        | Who owes the debt? Check one.                      | Disputed  |                    |  |  |  |  |
|          | Debtor 1 only                                      |   |                    |  |  |  |  |
|          | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |  |  |  |  |
| Ī        | Debtor 1 and Debtor 2 only                         | Student loans   |                    |  |  |  |  |
| Ī        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |  |  |  |  |
| 7        | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |  |  |  |  |
| "        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                    |  |  |  |  |
| ls       | s the claim subject to offest?                     |   |                    |  |  |  |  |
|          | No   | Other. Specify Credit Card or Credit Use                          |                    |  |  |  |  |
| $\vdash$ | Yes  |   | + 2 000 00         |  |  |  |  |
| 4.7      | Illinois Masonic Hospital                          | Last 4 digits of account number                                   | \$ <u>3,000.00</u> |  |  |  |  |
|          | Creditor's Name<br>836 W. Wellington               | When was the debt incurred?                                       |                    |  |  |  |  |
|          | Number Street                                      | THE WAS THE GEST HEATHER.   |                    |  |  |  |  |
|          | Number Street                                      |   |                    |  |  |  |  |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |  |  |  |  |
|          | Chicago IL 60657                                   | Contingent  |                    |  |  |  |  |
|          | City State Zip Code                                | Unliquidated  |                    |  |  |  |  |
| v        | Who owes the debt? Check one.                      | Disputed  |                    |  |  |  |  |
|          | Debtor 1 only                                      |   |                    |  |  |  |  |
|          | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |  |  |  |  |
|          | Debtor 1 and Debtor 2 only                         | Student loans   |                    |  |  |  |  |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |  |  |  |  |
| Ē        | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |  |  |  |  |
| "        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                    |  |  |  |  |
| ls       | s the claim subject to offest?                     |   |                    |  |  |  |  |
|          | No   | Other. Specify Medical/Dental Services                            |                    |  |  |  |  |
|          | Yes  |   |                    |  |  |  |  |

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| 4.8 Illinois State Foll Hwy Autil                 | Last 4 digits of account number  | \$ <u>200.00</u>    |
|---|--|---------------------|
| Creditor's Name                                   |  |                     |
| 2700 Ogden Ave.                                   | When was the debt incurred?  |                     |
| Number Street                                     |  |                     |
| Number Street                                     |  |                     |
|   | As of the date you file, the claim is: Check all that apply.             |                     |
|   | Contingent   |                     |
| Downers Grove IL 60515-1703                       |  |                     |
|   | Unliquidated   |                     |
| City State Zip Code Who owes the debt? Check one. | Disputed   |                     |
|   |  |                     |
| Debtor 1 only                                     |  |                     |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:                                     |                     |
| Dobter 1 and Dobter 2 anh                         | Student loans  |                     |
| Debtor 1 and Debtor 2 only                        |  |                     |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce             |                     |
| Check if this claim relates to a                  | that you did not report as priority claims                               |                     |
| community debt                                    | Debts to pension or profit-sharing plans, and other similar debts        |                     |
| Is the claim subject to offest?                   |  |                     |
|   | <b>-</b>   |                     |
| No  | Other. Specify Fines   |                     |
| Yes   |  |                     |
| 4.9 Kahuna Payment Solutions                      | Last 4 digits of account number 1594                                     | <u>\$ 577.00</u>    |
| Creditor's Name                                   | <del></del>  |                     |
| 1550 N Norwood Ste 305                            | When was the debt incurred? 2014-2015                                    |                     |
|   |  |                     |
| Number Street                                     |  |                     |
|   | As of the date you file, the claim is: Check all that apply.             |                     |
|   |  |                     |
| Hurst TX 76054                                    | Contingent   |                     |
|   | Unliquidated   |                     |
| City State Zip Code                               | Disputed   |                     |
| Who owes the debt? Check one.                     |  |                     |
| Debtor 1 only                                     |  |                     |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:                                     |                     |
|   |  |                     |
| Debtor 1 and Debtor 2 only                        | Student loans  |                     |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce             |                     |
| Check if this claim relates to a                  | that you did not report as priority claims                               |                     |
| community debt                                    | Debts to pension or profit-sharing plans, and other similar debts        |                     |
| Is the claim subject to offest?                   | Debts to pension of profit-sharing plans, and other similar debts        |                     |
|   | _  |                     |
| No  | Other. Specify Unknown Credit Extension                                  |                     |
| Yes   |  |                     |
| 4.10 Mark Management                              | Last 4 digits of account number 3176                                     | <b>\$</b> _1,925.00 |
| Creditor's Name                                   | <del></del>  |                     |
| 7161 N. Cicero                                    | When was the debt incurred?  |                     |
|   |  |                     |
| Number Street                                     |  |                     |
| #240  | As of the date you file, the claim is: Check all that apply.             |                     |
|   |  |                     |
| Lincolnwood IL 60712                              | Contingent   |                     |
|   | Unliquidated   |                     |
| City State Zip Code                               | Disputed   |                     |
| Who owes the debt? Check one.                     |  |                     |
| Debtor 1 only                                     |  |                     |
| Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:                                     |                     |
| l ==  |  |                     |
| Debtor 1 and Debtor 2 only                        | Student loans  |                     |
| At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce             |                     |
| Check if this claim relates to a                  | that you did not report as priority claims                               |                     |
| community debt                                    | Debts to pension or profit-sharing plans, and other similar debts        |                     |
| Is the claim subject to offest?                   | Design to periodicit of profit-origining plants, and other similar debts |                     |
| _ ·   | _  |                     |
| No  | Other. Specify   |                     |
| Yes   |  |                     |

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| After li | sting any entries on this page, number them be     | eginning with 4.4, followed by 4.5, and so forth.                 | Total Claim        |
|----------|--|---|--------------------|
| 4.11     | Northwest Collectors                               | Last 4 digits of account number 7192                              | <b>\$</b> 124.00   |
| 11.11    | Creditor's Name                                    |   |                    |
|          | 3601 Algonquin Rd Ste 23                           | When was the debt incurred? 2012-2012                             |                    |
|          | Number Street                                      |   |                    |
|          |  |   |                    |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |
|          | Dolling Moodows II 60000                           | Contingent  |                    |
|          | Rolling Meadows IL 60008                           | Unliquidated  |                    |
| v        | City State Zip Code  Vho owes the debt? Check one. | Disputed  |                    |
|          | Debtor 1 only                                      |   |                    |
|          | <b>=</b>   | T (NONDRIADITY  |                    |
|          | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |
| <u> </u> | Debtor 1 and Debtor 2 only                         | ☐ Student loans   |                    |
| L        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |
|          | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |
|          | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                    |
| ls       | s the claim subject to offest?                     |   |                    |
|          | No   | Other. Specify Medical Debt                                       |                    |
|          | Yes  |   | 4 000 00           |
| 4.12     | PLS  | Last 4 digits of account number                                   | \$ <u>1,800.00</u> |
|          | Creditor's Name                                    |   |                    |
|          | 3740 Broadway                                      | When was the debt incurred?                                       |                    |
|          | Number Street                                      |   |                    |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |
|          |  | Contingent  |                    |
|          | Gary IN 46408                                      |   |                    |
|          | City State Zip Code                                | Unliquidated  |                    |
| v        | /ho owes the debt? Check one.                      | Disputed  |                    |
|          | Debtor 1 only                                      |   |                    |
| ΙГ       | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |
| Ī        | Debtor 1 and Debtor 2 only                         | Student loans   |                    |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |
|          |  | that you did not report as priority claims                        |                    |
| L        | Check if this claim relates to a community debt    | Debts to pension or profit-sharing plans, and other similar debts |                    |
| 1        | s the claim subject to offest?                     | Debts to pension of profit-sharing plans, and other similar debts |                    |
| ì        | No   | Towns on DayDayLoop   |                    |
| 1 7      | ≒  | Other. Specify PayDay Loan  |                    |
| 4.40     | Yes<br>PNC Bank                                    | Lost A digita of account number                                   | <b>\$</b> 700.00   |
| 4.13     | Creditor's Name                                    | Last 4 digits of account number                                   | φ_100.00           |
|          | 222 Delaware Avenue                                | When was the debt incurred?                                       |                    |
| 1        |  |   |                    |
|          | Number Street                                      |   |                    |
| 1        |  | As of the date you file, the claim is: Check all that apply.      |                    |
|          |  | Contingent  |                    |
| 1        | Wilmington DE 19899                                | Unliquidated  |                    |
| ١.,      | City State Zip Code                                | Disputed  |                    |
|          | /ho owes the debt? Check one.                      |   |                    |
|          | Debtor 1 only                                      |   |                    |
| <u> </u> | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |
| [        | Debtor 1 and Debtor 2 only                         | Student loans   |                    |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |
| 1 7      | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |
| "        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                    |
| ls       | the claim subject to offest?                       | <del>_</del>  |                    |
|          | No   | Other. Specify Credit Card or Credit Use                          |                    |
| Ī        | Yes  |   |                    |
|          |  |   |                    |

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Case Number (if known) **Document** Krystin Naomi Debtor 1

Your NONPRIORITY Unsecured Claims - Continuation Page

| After | listing any entries on this page, number them be  | eginning with 4.4, followed by 4.5, and so forth.  | Total Claim        |
|-------|---|--|--------------------|
|       | Security Credit Services LLC                      |  | <b>\$</b> 0.00     |
| 4.14  | Creditor's Name                                   | Last 4 digits of account number  | \$ 0.00            |
|       | 2623 W. Oxford Lopp                               | When was the debt incurred?  |                    |
|       | Number Street                                     |  |                    |
|       |   | As of the date you file, the claim is: Check all that apply.   |                    |
|       |   | Contingent   |                    |
|       | Oxford MS 38655                                   | Unliquidated   |                    |
|       | City State Zip Code Who owes the debt? Check one. | Disputed   |                    |
|       | Debtor 1 only                                     |  |                    |
|       | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:   |                    |
|       | Debtor 1 and Debtor 2 only                        | Student loans  |                    |
|       | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce   |                    |
|       | Check if this claim relates to a                  | that you did not report as priority claims   |                    |
|       | community debt                                    | Debts to pension or profit-sharing plans, and other similar debts  |                    |
|       | Is the claim subject to offest?                   | <del>-</del>   |                    |
|       | No  | Other. Specify Credit Extended to Debtor(s)  |                    |
|       | Yes Total Finance                                 |  | ÷ E 000 00         |
| 4.15  |   | Last 4 digits of account number  | \$ <u>5,000.00</u> |
|       | Creditor's Name<br>2917 W Irving Park Rd          | When was the debt incurred?  |                    |
|       | Number Street                                     |  |                    |
|       |   | As of the date way file the plain in Obselvation to  |                    |
|       |   | As of the date you file, the claim is: Check all that apply.   |                    |
|       | Chicago IL 60618                                  | ☐ Contingent ☐ Unliquidated  |                    |
|       | City State Zip Code                               | Disputed   |                    |
|       | Who owes the debt? Check one.                     |  |                    |
|       | Debtor 1 only                                     |  |                    |
|       | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:   |                    |
|       | Debtor 1 and Debtor 2 only                        | Student loans  |                    |
|       | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce<br>that you did not report as priority claims |                    |
|       | Check if this claim relates to a community debt   | Debts to pension or profit-sharing plans, and other similar debts  |                    |
|       | Is the claim subject to offest?                   | Debts to pension of profit-straining plans, and other similar debts  |                    |
|       | No  | Other. Specify Deficiency, Repo'd/Surr'd Auto  |                    |
|       | Yes   |  |                    |
| 4.16  | Victoria's Secret/WFNNB                           | Last 4 digits of account number  | <b>\$</b> _400.00  |
|       | Creditor's Name                                   | When you the debt to some 40   |                    |
|       | PO Box 182128                                     | When was the debt incurred?  |                    |
|       | Number Street                                     |  |                    |
|       |   | As of the date you file, the claim is: Check all that apply.   |                    |
|       | Columbus OH 43218                                 | Contingent   |                    |
|       | City State Zip Code                               | Unliquidated   |                    |
|       | Who owes the debt? Check one.                     | Disputed   |                    |
|       | Debtor 1 only                                     |  |                    |
|       | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:   |                    |
|       | Debtor 1 and Debtor 2 only                        | Student loans  |                    |
|       | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce   |                    |
|       | Check if this claim relates to a                  | that you did not report as priority claims   |                    |
|       | community debt                                    | Debts to pension or profit-sharing plans, and other similar debts  |                    |
|       | Is the claim subject to offest?                   | Out of the Credit Card or Credit Llea  |                    |
|       | Yes   | Other. Specify Credit Card or Credit Use   |                    |
|       | _ ·   |  |                    |

Official Form 106E/F

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List Others to Be Notified for a Debt That You Already Listed

| 5. | Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. |                      |   |  |  |  |  |  |
|----|--|----------------------|---|--|--|--|--|--|
|    | Secretary of State   |                      | On which entry in Part 1 or Part 2                          | list the original creditor?  |  |  |  |  |
|    | Name<br>2701 S. Dirksen Pkwy.<br>Number Street   |                      | Line 3 of (Check one):                                      | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims                               |  |  |  |  |
|    | Springfield City State   | IL 62723<br>Zip Code | Last 4 digits of account number _                           |  |  |  |  |  |
|    | Clerk, First Mun Div  Name 50 W. Washington St., Rm. 1001  Number Street   |                      | On which entry in Part 1 or Part 2  Line 10 of (Check one): | list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |  |  |  |  |
|    | Chicago III  | 60602<br>Zip Code    | Last 4 digits of account number _                           | <u>3176</u>  |  |  |  |  |

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Krystin Debtor 1

Naomi

Add the Amounts for Each Type of Unsecured Claim

**Document** 

Middle Name

| ı | 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. |
|---|--|
| ı | Add the amounts for each type of unsecured claim.  |

|                          |   |     | Total claim |               |
|--------------------------|---|-----|-------------|---------------|
| Total claims from Part 1 | 6a. Domestic support obligations  | 6a. | \$          | 0.00          |
|                          | 6b. Taxes and Certain other debts you owe the government  | 6b. | \$          | 0.00          |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c. | \$          | 0.00          |
|                          | 6d. <b>Other.</b> Add all other priority unsecured claims.  Write that amount here.                         | 6d. | \$          | 0.00          |
|                          | 6e. <b>Total.</b> Add lines 6a through 6d.  | 6e. | \$          | 0.00          |
|                          |   |     | Total claim |               |
| Total claims             | 6f. Student loans   | 6f. | \$          | 0.00          |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$          | 0.00          |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$          | 0.00          |
|                          | 6i. <b>Other.</b> Add all other nonpriority unsecured claims.  Write that amount here.                      | 6i. | \$          | <u>39</u> .00 |
|                          |   |     |             |               |

|      |                                   | Caso 16             | : 24012 Doc 1 E  | ilod 10/25/16               | Entor                      | ed 10/25/16                                     | 14:22:05                             | Desc Main                       |       |
|------|-----------------------------------|---------------------|--|-----------------------------|----------------------------|---|--------------------------------------|---------------------------------|-------|
| Fi   | ll in this in                     | formation to iden   | tify your case:  |                             |                            | 7 of 59   |                                      |                                 |       |
| D    | ebtor 1                           | Krystin             | Naomi  | Gooden                      | -                          |   |                                      |                                 |       |
| D    | ebtor 2                           | First Name          | Middle Name  | Last Name                   |                            |   |                                      |                                 |       |
|      | pouse, if filing)                 | First Name          | Middle Name  | Last Name                   | -                          |   |                                      |                                 |       |
| U    | nited States                      | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of _                              |                             |                            |   |                                      |                                 |       |
|      | ase Number<br>f known)            |                     |  | (State)                     |                            |   |                                      | Check if this is amended filing |       |
| Off  | icial F                           | orm 106G            |  |                             |                            |   |                                      |                                 |       |
| Scł  | nedule                            | G: Execut           | ory Contracts and  | Unexpired Lea               | ses                        |   |                                      |                                 | 12/15 |
| nfor | mation. If n                      | nore space is nee   | possible. If two married people<br>eded, copy the additional page, | fill it out, number the e   | h are equal<br>ntries, and | ly responsible for su<br>attach it to this page | pplying correct<br>. On the top of a | ny                              |       |
|      |                                   | ·                   | ne and case number (if known).<br>contracts or unexpired leases?   |                             |                            |   |                                      |                                 |       |
| 1. [ | _                                 | -                   | submit this form to the court with                                 |                             | ou have no                 | thing else to report on                         | this form                            |                                 |       |
| [    | _                                 |                     | mation below even if the contrac                                   |                             |                            |   |                                      |                                 |       |
|      |                                   |                     |  |                             |                            | (   |                                      |                                 |       |
|      |                                   |                     | or company with whom you ha  |                             |                            |   |                                      |                                 |       |
|      | <b>xample, re</b><br>inexpired le |                     | cell phone). See the instruction                                   | s for this form in the inst | ruction boo                | klet for more examples                          | s of executory co                    | ntracts and                     |       |
|      | Person or                         | company with wl     | hom you have the contract or l                                     | ease                        |                            | State what the                                  | contract or lease                    | e is for                        |       |
| 2.1  | 1                                 |                     |  |                             |                            |   |                                      |                                 |       |
|      | Name                              |                     |  |                             | -                          |   |                                      |                                 |       |
|      | Number                            | Street              |  |                             | _                          |   |                                      |                                 |       |
|      | City                              |                     | State Zip  | Code                        | -                          |   |                                      |                                 |       |
| 2.2  |                                   |                     |  |                             |                            |   |                                      |                                 |       |
|      | Name                              |                     |  |                             | -                          |   |                                      |                                 |       |
|      | Number                            | Street              |  |                             | _                          |   |                                      |                                 |       |
|      |                                   |                     |  |                             | _                          |   |                                      |                                 |       |
|      | City                              |                     | State Zip  | Code                        |                            |   |                                      |                                 |       |
| 2.3  |                                   |                     |  |                             | _                          |   |                                      |                                 |       |
|      | Name                              |                     |  |                             |                            |   |                                      |                                 |       |
|      | Number                            | Street              |  |                             | _                          |   |                                      |                                 |       |
|      | City                              |                     | State Zip  | Code                        | -                          |   |                                      |                                 |       |
|      | 1                                 |                     |  |                             |                            |   |                                      |                                 |       |
| 2.4  | <u></u>                           |                     |  |                             | -                          |   |                                      |                                 |       |
|      | Name                              |                     |  |                             | _                          |   |                                      |                                 |       |
|      | Number                            | Street              |  |                             |                            |   |                                      |                                 |       |
|      | City                              |                     | State Zip  | Code                        | _                          |   |                                      |                                 |       |
| 2.5  |                                   |                     |  |                             |                            |   |                                      |                                 |       |
|      | Name                              |                     |  |                             | -                          |   |                                      |                                 |       |
|      | Number                            | Street              |  |                             | _                          |   |                                      |                                 |       |
|      |                                   |                     |  |                             |                            |   |                                      |                                 |       |

State Zip Code

City

Official Form 106G

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| Fill in this inf    | Fill in this information to identify your case: |                                       |           |  |
|---------------------|---|---------------------------------------|-----------|--|
| Debtor 1            | Krystin   | Naomi                                 | Gooden    |  |
|                     | First Name                                      | Middle Name                           | Last Name |  |
| Debtor 2            |   |                                       |           |  |
| (Spouse, if filing) | First Name                                      | Middle Name                           | Last Name |  |
| United States I     | Bankruptcy Court for                            | r the : <u>NORTHERN</u> District of _ |           |  |
| Case Number         |   |                                       | (State)   |  |
| (If known)          |   |                                       |           |  |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any Additional Pages, write your name and case number (if known). Answer every question.                 |                   |   |                               |                 |  |  |  |  |
|--|-------------------|---|-------------------------------|-----------------|--|--|--|--|
| 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) |                   |   |                               |                 |  |  |  |  |
|  | ■ No. □ Yes       |   |                               |                 |  |  |  |  |
|  |                   | <b>8 years, have you lived in a c</b><br>rnia, Idaho, Lousiiana, Nevada |                               | • ,             | nunity property states and territories include n, and Wisconsin.)  |  |  |  |
|  | No. Go to line 3. |   |                               |                 |  |  |  |  |
|  | Yes. Did yo       | our spouse, former spouse, or   | legal equivalent live with yo | ou at the time? |  |  |  |  |
|  | _                 | nwhich community state or ter   | ritory did you live?          | Fill            | in the name and current address of that person.  |  |  |  |
|  | Name of           | your spouse, former spouse or legal equ                                 | uivalent                      | <del></del> ,   |  |  |  |  |
|  | Number            | Street  |                               |                 |  |  |  |  |
|  | City              |   | State                         | Zip Code        |  |  |  |  |
| s  | -                 | or Schedule G to fill out Colu  |                               |                 | ficial Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply: |  |  |  |
| 3.1  |                   |   |                               |                 | Schedule D, line   |  |  |  |
|  | Name              |   |                               |                 | Schedule E/F, line   |  |  |  |
|  | Number            | Street  |                               |                 | Schedule G, line   |  |  |  |
|  | City              |   | State                         | Zip Code        |  |  |  |  |
| 3.2  |                   |   |                               |                 | Schedule D, line   |  |  |  |
|  | Name              |   |                               |                 | Schedule E/F, line   |  |  |  |
|  | Number            | Street  |                               |                 | Schedule G, line   |  |  |  |
|  | City              |   | State                         | Zip Code        |  |  |  |  |
| 3.3  |                   |   |                               |                 | Schedule D, line   |  |  |  |
|  | Name              |   |                               |                 | Schedule E/F, line   |  |  |  |
|  | Number            | Street  |                               |                 | Schedule G, line   |  |  |  |
|  | City              |   | State                         | Zip Code        |  |  |  |  |

Official Form 106H Record # 721714 Schedule H: Your Codebtors Page 1 of 1

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| Fill in this in     | formation to ident   | tify your case:                  |             |
|---------------------|----------------------|----------------------------------|-------------|
| Debtor 1            | Krystin              | Naomi                            | Gooden      |
|                     | First Name           | Middle Name                      | Last Name   |
| Debtor 2            | -                    |                                  |             |
| (Spouse, if filing) | First Name           | Middle Name                      | Last Name   |
| United States       | Bankruptcy Court for | the : <u>NORTHERN DISTRICT O</u> | OF ILLINOIS |
| Case Number         | r                    |                                  | <u> </u>    |
| (If known)          |                      |                                  |             |
|                     |                      |                                  |             |
|                     |                      |                                  |             |

Official Form 106I

MM / DD / YYYY

## **Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Describe Employment   |   |                         |              |                                   |  |
|----|---|---|-------------------------|--------------|-----------------------------------|--|
| 1. | Fill in your employment information   |   | Debtor 1                |              | Debtor 2 or non-filing spouse     |  |
|    | If you have more than one job, attach a separate page with information about additional employers.  | Employment status   | X Employed Not employed |              | Employed  Not employed            |  |
|    | Include part-time, seasonal, or self-employed work.   | Occupation  | Security Guard          |              | None                              |  |
|    | Occupation may Include student or homemaker, if it applies.   | Employers name Employers address                                      | Guardian Security       |              |                                   |  |
|    |   | How long employed there?  | Chicago, IL 60661       |              | ·                                 |  |
| Pa | Part 2: Give Details About Monthly Income  Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.  If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. |   |                         |              |                                   |  |
|    |   |   |                         | For Debtor 1 | For Debtor 2 or non-filing spouse |  |
| 2. |   | y and commissions (before all pa<br>calculate what the monthly wage w | -                       | \$2,253.33   | \$0.00                            |  |
| 3. | Estimate and list monthly overti  | me pay.   |                         | \$0.00       | \$0.00                            |  |
| 4. | Calculate gross income. Add line  | e 2 + line 3.   |                         | \$2,253.33   | \$0.00                            |  |

Official Form 106I Record # 721714 Schedule I: Your Income Page 1 of 2

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Document Krystin Naomi Debtor 1 Case Number (if known) First Name Middle Name Last Name

|                |                        |   |                                   | For Debtor 1             |           | ebtor 2 or<br>iling spouse |      |            |
|----------------|------------------------|---|-----------------------------------|--------------------------|-----------|----------------------------|------|------------|
|                | Copy                   | line 4 here   | 4.                                | \$2,253.33               |           | \$0.00                     |      |            |
| 5. <b>L</b> i  |                        | payroll deductions:   |                                   |                          |           |                            |      |            |
|                |                        | ax, Medicare, and Social Security deductions  | 5a.<br>                           | \$243.84                 |           | \$0.00                     |      |            |
|                |                        | landatory contributions for retirement plans  | 5b.<br>                           | \$0.00                   |           | \$0.00                     |      |            |
|                |                        | oluntary contributions for retirement plans   | 5c.<br>—                          | \$0.00                   |           | \$0.00                     |      |            |
|                |                        | Required repayments of retirement fund loans  | 5d.<br>                           | \$0.00                   |           | \$0.00                     |      |            |
|                |                        | nsurance  | 5e.                               | \$0.00                   |           | \$0.00                     |      |            |
|                |                        | Omestic support obligations   | 5f.<br>—                          | \$0.00                   |           | \$0.00                     |      |            |
|                | -                      | Inion dues  | 5g.                               | \$0.00                   |           | \$0.00                     |      |            |
| 0.4            |                        | Other deductions. Specify:  | 5h.<br>—                          | \$0.00                   |           | \$0.00                     |      |            |
|                |                        | <b>payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.  | 6.<br>_ <b>—</b>                  | \$243.84                 |           | \$0.00                     |      |            |
|                |                        | te total monthly take-home pay. Subtract line 6 from line 4.  | 7.                                | \$2,009.50               |           | \$0.00                     |      |            |
| 8. <b>Li</b> : |                        | other income regularly received:  |                                   |                          |           |                            |      |            |
|                | 8a.                    | Net income from rental property and from operating a business,  |                                   |                          |           |                            |      |            |
|                |                        | profession, or farm   |                                   |                          |           |                            |      |            |
|                |                        | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total   |                                   |                          |           |                            |      |            |
|                |                        | monthly net income.   | 8a.                               | \$150.00                 |           | \$0.00                     |      |            |
|                | 8b.                    | Interest and dividends  | 8b.                               | \$0.00                   |           | \$0.00                     |      |            |
|                | 8c.                    | Family support payments that you, a non-filing spouse, or a   | 8c.                               | \$ 0.00                  |           | \$ 0.00                    |      |            |
|                |                        | dependent regularly receive   |                                   |                          |           |                            |      |            |
|                |                        | Include alimony, spousal support, child support, maintenance, divorce   |                                   |                          |           |                            |      |            |
|                |                        | settlement, and property settlement.  |                                   |                          |           |                            |      |            |
|                | 8d.                    | Unemployment compensation   | 8d.                               | \$0.00                   |           | \$0.00                     |      |            |
|                | 8e.                    | Social Security   | 8e.                               | \$0.00                   |           | \$0.00                     |      |            |
|                | 8f.                    | Other government assistance that you regularly receive  | 8f.                               | \$170.00                 |           | \$0.00                     |      |            |
|                |                        | Include cash assistance and the value (if known) of any non-cash  |                                   |                          |           |                            |      |            |
|                |                        | assistance that you receive, such as food stamps (benefits under the  |                                   |                          |           |                            |      |            |
|                |                        | Supplemental Nutrition Assistance Program) or housing subsidies.  |                                   |                          |           |                            |      |            |
|                | •                      | Specify:  |                                   |                          |           |                            |      |            |
|                | 8g.                    | Pension or retirement income  | 8g.<br>—                          | \$0.00                   |           | \$0.00                     |      |            |
|                | 8h.                    | Other monthly income. Specify:  | 8h.<br>—                          | \$0.00                   |           | \$0.00                     |      |            |
| 9.             | Add                    | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.   | 9                                 | \$320.00                 |           | \$0.00                     |      |            |
| 10.            | Calc                   | ulate monthly income. Add line 7 + line 9.  | 10.                               | \$2,329.50               |           | \$0.00                     | . Г  | \$2,329.50 |
|                | Add                    | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | <u> </u>                          | <del>+=,=====</del>      |           | 40.00                      | L    | ΨΣ,0Σ0.00  |
| 11.            | Inclu<br>other<br>Do n | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, you friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are relatify: | our dependent<br>not available to |                          |           |                            | 11   | \$0.00     |
| 12.            |                        | the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Ce  |                                   | •                        | t applies |                            | 12.  | \$2,329.50 |
| 13.            |                        | ou expect an increase or decrease within the year after you file this form  |                                   | s and Neialed Dald, II I | r applies |                            | '- L | Ψ2,323.30  |
| 10.            | x I                    |   | •                                 |                          |           |                            |      |            |

| Fill in this in                 | nformation to identify  | your case:  |                             |   |   |                                |
|---------------------------------|---|---|-----------------------------|---|---|--------------------------------|
| Debtor 1                        | Krystin   | Naomi   | Gooden                      | Check if this is  | :   |                                |
|                                 | First Name  | Middle Name   | Last Name                   | An amend  | •   |                                |
| Debtor 2<br>(Spouse, if filing) | First Name  | Middle Name   | Last Name                   |   | ment showing post<br>s of the following c | t-petition chapter 13<br>date: |
| United States                   | s Bankruptcy Court for the  | :NORTHERN DISTRICT C                                  | F ILLINOIS                  |   |   |                                |
| Case Numbe                      | er  |   | _                           | MM / DD   | / YYYY                                    |                                |
| Official F                      | 100 l   |   |                             | 11 '  | •   | 2 because Debtor 2             |
|                                 | orm 106J  |   |                             | maintains   | a separate house                          | ehold.                         |
|                                 | le J: Your E  | _   |                             |   |   | 12/14                          |
|                                 |   |   |                             | n are equally responsible for suppl<br>ages, write your name and case nu            |   |                                |
| Part 1:                         | Describe Your Househo   | old   |                             |   |   |                                |
|                                 | Go to line 2.  Does Debtor 2 live in  No.                             | a separate household?<br>nust file a separate Schedul | e J.                        |   |   |                                |
| _                               | have dependents?  | No No   |                             | Dependent's relationship to<br>Debtor 1 or Debtor 2                                 | Dependent's age                           | Does dependent live with you?  |
| Do not li<br>Debtor 2           | ist Debtor 1 and<br>2.  |   | this information for dent   | Son   | 10  | No                             |
|                                 | state the dependents'   |   |                             | 5011  |   | Yes                            |
| names.                          |   |   |                             | Son   | 4   | No                             |
|                                 |   |   |                             |   |   | X Yes                          |
|                                 |   |   |                             |   |   | Yes                            |
|                                 |   |   |                             |   |   | X No                           |
|                                 |   |   |                             |   |   | Yes                            |
|                                 |   |   |                             |   |   | X No                           |
|                                 |   |   |                             |   |   | Yes                            |
| expense                         | r expenses include<br>es of people other tha<br>f and your dependents | 1               |                             |   |   |                                |
| Part 2:                         | Estimate Your Ongoing   | Monthly Expenses                                      |                             |   |   |                                |
| -                               | -   |   |                             | rm as a supplement in a Chapter 13<br><i>J</i> , check the box at the top of the fo |   |                                |
| the applicable                  |   | -cash government assista                              | nce if you know the value   |   |   |                                |
|                                 | -   | led it on Schedule I: Your                            | =                           |   | ١   | Your expenses                  |
| 4. The ren                      | ital or home ownershi   | p expenses for your resid                             | ence. Include first mortgag | ge payments and   |   |                                |
|                                 | t for the ground or lot.  |   |                             |   | 4.  | \$400.00                       |
|                                 | cluded in line 4:   |   |                             |   |   | <b>***</b>                     |
|                                 | eal estate taxes  | or roptorio incurso                                   |                             |   | 4a.                                       | \$0.00<br>\$0.00               |
|                                 | roperty, homeowner's,   | or renter's insurance air, and upkeep expenses        |                             |   | 4b.<br>4c.                                | \$50.00                        |
|                                 | •   | n or condominium dues                                 |                             |   | 4c.<br>4d.                                | \$0.00                         |
|                                 |   |   |                             |   |   |                                |

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Krystin Debtor 1

Naomi

Document

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Case Number (if known) \_\_ First Name Middle Name Last Name Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$200.00 6a. 6a. Electricity, heat, natural gas \$0.00 6b. Water, sewer, garbage collection \$247.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$650.00 7. 7. Food and housekeeping supplies \$100.00 8. 8. Childcare and children's education costs \$190.00 9. Clothing, laundry, and dry cleaning 10. \$40.00 Personal care products and services 10. \$50.00 11. Medical and dental expenses 11. \$150.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 Charitable contributions and religious donations 14. 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a Life insurance \$0.00 15b. Health insurance 15b. \$0.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$0.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:\_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

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Krystin Naomi Debtor 1 Case Number (if known) \_ First Name Middle Name Last Name \$50.00 Business Expenses (\$50.00), 21. 21. Other. Specify: \$2,127.00 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$2,329.50 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$2,127.00 23b. Copy your monthly expenses from line 22 above. 23b.-\$202.50 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 721714 Schedule J: Your Expenses Page 3 of 3

# Official Form 106 Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |   |
|---|---|
| Did you pay or agree to pay someone who is NOT an | attorney to help you fill out bankruptcy forms?   |
| No  |   |
| Yes. Name of Person                               | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|   |   |
|   |   |
|   |   |
|   | e summary and schedules filed with this declaration and that they are true and                |
| correct.  |   |
| ✗ /s/ Krystin Naomi Gooden                        | ×   |
| Signature of Debtor 1                             | Signature of Debtor 2   |
| <sub>Date</sub> 10/24/2016                        | Date  |
| MM / DD / YYYY                                    | DateMM / DD / YYYY  |
|   |   |

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| Fill in this in           | formation to ident    | ify your case:                    |                     |
|---------------------------|-----------------------|-----------------------------------|---------------------|
| Debtor 1                  | Krystin<br>First Name | Naomi<br>Middle Name              | Gooden<br>Last Name |
| Debtor 2                  |                       |                                   |                     |
| (Spouse, if filing)       | First Name            | Middle Name                       | Last Name           |
| United States             | Bankruptcy Court for  | the : <u>NORTHERN</u> District of | ILLINOIS (State)    |
| Case Number<br>(If known) | ī                     |                                   | (State)             |

# Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| illiber (II i | known). Answer every question.  |                              |                    |                        |
|---------------|---|------------------------------|--------------------|------------------------|
| Part 1:       | Give Details About Your Marital Status and Wh   | ere You Lived Before         |                    |                        |
|               | is your current marital status?   |                              |                    |                        |
| _             | •   |                              |                    |                        |
| _             | arried  |                              |                    |                        |
| No            | ot married  |                              |                    |                        |
| 2 Duning      | with a last 2 years have you lived anywhere athe  | an than whare were live no   | a                  |                        |
|               | g the last 3 years, have you lived anywhere oth   | ier tilali where you live ho | w :                |                        |
|               | es. List all of the places you lived in the last 3 yea  | rs. Do not include where     | ou live now.       |                        |
|               | , ,   | •                            |                    |                        |
| D             | Debtor 1  | Dates Debtor 1               | Debtor 2:          | Dates Debtor 2         |
|               |   | lived there                  | Danie as Baltina 4 | lived there            |
| _             | 044 N BU - BU -   | FD014 00/0040                | Same as Debtor 1   | Same as Debtor         |
|               | 014 N Ridge Blvd  | FROM 02/2012                 |                    |                        |
| <u>U</u>      | hicago IL 60645-3581  | To 05/2014                   |                    |                        |
| _             | <del></del>   |                              |                    | <del></del>            |
|               |   |                              |                    |                        |
| and W         | rty states and territories include Arizona, Calificonsin.)  b.  s. Make sure you fill out Schedule H: Your Code  Explain the Sources of Your Income |                              |                    | <b>vv</b> asiiiigioii, |
|               |   |                              |                    |                        |
|               |   |                              |                    |                        |
|               |   |                              |                    |                        |
|               |   |                              |                    |                        |
|               |   |                              |                    |                        |
|               |   |                              |                    |                        |
|               |   |                              |                    |                        |
|               |   |                              |                    |                        |
|               |   |                              |                    |                        |
|               |   |                              |                    |                        |
|               |   |                              |                    |                        |

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Debtor 1 Krystin Naomi Gooden Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, \$ 20,000 Wages, commissions, From January 1 of current year until bonuses, tips bonuses, tips \$1,500 the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$ 10,813 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) \$0 Operating a business Operating a business Wages, commissions, Wages, commissions, \$ 10,813 For the calendar year before that: bonuses, tips bonuses, tips \$0 (January 1 to December 31, 2014) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

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Krystin Naomi Gooden Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payments Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid owe 08 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment Include creditor's name Identify Legal actions, Repossessions, and Foreclosures Part 4: Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No. Yes. Fill in the details. Status of the case Nature of the case Court or agency

Record # 721714

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| Debto  | r 1  | Krystin                                | Naomi             | Gooden                                   | Case Number (if kno                | wn)              | <del></del>           |
|--|--|--|-------------------|--|------------------------------------|------------------|-----------------------|
|  |  | First Name                             | Middle Name       | Last Name                                |                                    |                  |                       |
| Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. |  |  |                   |  |                                    |                  |                       |
|  | 1  | No. Go to line 11                      |                   |  |                                    |                  |                       |
|  | `  | es. Fill in the information b          | elow.             |  |                                    |                  |                       |
|  |  |  |                   | Describe the property                    | D                                  | ate              | Value of the property |
|  |  | Total Finance, see Sch. D.             |                   | 2008 Hyundai Azera                       | 8                                  | /2016            | \$ 5,000              |
|  |  |  |                   |  |                                    |                  |                       |
|  |  |  |                   |  |                                    |                  |                       |
|  |  |  |                   |  |                                    |                  |                       |
|  |  |  |                   | Explain what happened                    |                                    |                  |                       |
|  |  |  |                   | Property was repossessed.                |                                    |                  |                       |
|  |  |  |                   | Property was foreclosed.                 |                                    |                  |                       |
|  |  |  |                   | Property was garnished.                  |                                    |                  |                       |
|  |  |  |                   | Property was attached, seize             | d, or levied.                      |                  |                       |
|  |  |  |                   | _  |                                    |                  |                       |
|  |  |  |                   |  |                                    |                  |                       |
|  |  | in 90 days before you filed            |                   | did any creditor, including a bank or t  | financial institution, set off any | amounts fror     | n your accounts       |
|  | <b>—</b> 1   | No. Go to line 11                      |                   |  |                                    |                  |                       |
|  | =  | es. Fill in the information b          | elow              |  |                                    |                  |                       |
|  | —<br>With  | in 1 year before you filed f           | or bankruptcy, w  | as any of your property in the posses    | sion of an assignee for the ber    | nefit of credito | rs, a                 |
| '  |  | t-appointed receiver, a cus            | stodian, or anoth | er oπiciai?                              |                                    |                  |                       |
|  |  |  |                   |  |                                    |                  |                       |
|  | ∐ Y  | es.<br>                                |                   |  |                                    |                  |                       |
| Pa   | ırt 5:   | List Certain Gifts and C               | ontributions      |  |                                    |                  |                       |
|  |  |  | for bankruptcy,   | did you give any gifts with a total valu | e of more than \$600 per perso     | n?               |                       |
|  | 1  | No.                                    |                   |  |                                    |                  |                       |
|  | 二、   | Yes. Fill in the details for ea        | ch aift.          |  |                                    |                  |                       |
| 14   |  |  |                   | did you give any gifts or contributions  | s with a total value of more tha   | n \$600 to any   | charity?              |
|  | _  |  | ,                 | , , ,                                    |                                    |                  | •                     |
|  | 1  |  | -l:#              |  |                                    |                  |                       |
|  | Ш,   | Yes. Fill in the details for ea        | cn giπ.           |  |                                    |                  |                       |
| Ps   | ırt 6:   | List Certain Losses                    |                   |  |                                    |                  |                       |
|  |  |  |                   |  |                                    |                  |                       |
|  |  | in 1 year before you filed t<br>bling? | for bankruptcy or | since you filed for bankruptcy, did yo   | ou lose anything because of th     | eft, fire, other | disaster, or          |
|  | 1  | No.                                    |                   |  |                                    |                  |                       |
|  | =  | es. Fill in the details for ea         | ch gift.          |  |                                    |                  |                       |
|  | _  |  | Ü                 |  |                                    |                  |                       |
| Pa   | art 7:   | List Certain Payments                  | or Transfers      |  |                                    |                  |                       |
| 16   | With   | in 1 year before you filed t           | for bankruptcy, d | id you or anyone else acting on your     | behalf pay or transfer any prop    | erty to anyon    | e you                 |
|  | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. |  |                   |  |                                    |                  |                       |
|  | П r  |  |                   |  |                                    |                  |                       |
|  | =  |  |                   |  |                                    |                  |                       |
|  |  | Yes. Fill in the details               |                   |  |                                    |                  |                       |
|  |  |  |                   |  |                                    |                  |                       |
|  |  |  |                   |  |                                    |                  |                       |
|  |  |  |                   |  |                                    |                  |                       |
|  |  |  |                   |  |                                    |                  |                       |
|  |  |  |                   |  |                                    |                  |                       |
|  |  |  |                   |  |                                    |                  |                       |

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Last Name

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Krystin Naomi Gooden Case Number (if known)

|    | Party Contact Info  | Description and value of             | any property transferred      | Date payn or transfe                                 |  |  |  |  |  |
|----|---|--------------------------------------|-------------------------------|--|--|--|--|--|--|
|    | Geraci Law L.L.C.  55 E. Monroe Street #3400  Chicago,IL 60603  |                                      |                               |  | Payment/Value:<br>\$4,000.00: \$0.00<br>paid prior to filing,<br>balance to be paid<br>through the plan. |  |  |  |  |
|    | Party Contact Info  | Description and value of             | any property transferred      | Date payn or transfe                                 |  |  |  |  |  |
|    | Hananwill Credit Counseling  115 N. Cross St.  Robinson, IL 62454   | Credit Counseling Services           |                               | 2016   | \$25.00  |  |  |  |  |
| 17 | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No.  Yes. Fill in the details.   |                                      |                               |  |  |  |  |  |  |
| 18 | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).  Do not include gifts and transfers that you have already listed on this statement.  No.  Yes. Fill in the details for each gift. |                                      |                               |  |  |  |  |  |  |
| 19 | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No.  Yes. Fill in the details for each gift.   |                                      |                               |  |  |  |  |  |  |
| P  | List Certain Financial Accounts, Instru   | uments, Safe Deposit Boxes, and Stor | age Units                     |  |  |  |  |  |  |
|    |   |                                      |                               |  |  |  |  |  |  |
|    |   | Last 4 digits of account number      | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer  |  |  |  |  |
| 21 | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No.   |                                      |                               |  |  |  |  |  |  |
|    | Yes. Fill in the details.   | Who else had access to it?           | Describe the conte            | nts  | Do you still have it?  |  |  |  |  |

Debtor 1

First Name

Middle Name

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| Depto | or 1  | Niysuii  | Naum  | Gooden  | Case Number (If known)                      |                       |  |  |  |  |
|-------|---|--|---|---|---|-----------------------|--|--|--|--|
|       |   | First Name   | Middle Name   | Last Name   |   |                       |  |  |  |  |
| 22    | Hav   | e you stored pro   | perty in a storage unit o                                     | r place other than your home within 1 y   | ear before you filed for bankruptcy?        |                       |  |  |  |  |
|       | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? |  |   |   |   |                       |  |  |  |  |
|       | =   | No.  |   |   |   |                       |  |  |  |  |
|       | Ш   | Yes. Fill in the det   | tails.  |   |   | -                     |  |  |  |  |
|       |   |  |   | Who else has or had access to it?   | Describe the contents                       | Do you still have it? |  |  |  |  |
|       |   |  |   |   |   |                       |  |  |  |  |
| P     | art 9:  | Identify Prop  | erty You Hold or Control f                                    | for Someone Else  |   |                       |  |  |  |  |
| 23    | -   | o you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust or someone. |   |   |   |                       |  |  |  |  |
|       |   | No.  |   |   |   |                       |  |  |  |  |
|       | =   | Yes. Fill in the det   | tails   |   |   |                       |  |  |  |  |
|       | ш   |  |   | Where is the property?  | Describe the property                       | Value                 |  |  |  |  |
|       |   |  |   |   |   |                       |  |  |  |  |
| Pa    | art 10  | Give Details   | About Environmental Info                                      | rmation   |   |                       |  |  |  |  |
| For   | the   | purpose of Part 1  | 0, the following definition                                   | ons apply:  |   |                       |  |  |  |  |
|       |   |  |   |   |   |                       |  |  |  |  |
|       | haza  | rdous or toxic su  | ıbstances, wastes, or m                                       | or local statute or regulation concerning<br>aterial into the air, land, soil, surface wa<br>the cleanup of these substances, waste | ater, groundwater, or other medium,         |                       |  |  |  |  |
|       |   | -  | ion, facility, or property a<br>erate, or utilize it, includi |   | v, whether you now own, operate, or utilize | <b>;</b>              |  |  |  |  |
|       | Haza  | ardous material m  | neans anything an envir                                       | onmental law defines as a hazardous w   | aste, hazardous substance, toxic            |                       |  |  |  |  |
|       | subs  | stance, hazardous  | s material, pollutant, coi                                    | ntaminant, or similar term.   |   |                       |  |  |  |  |
| Rep   | ort a   | all notices, releas  | es, and proceedings tha                                       | at you know about, regardless of when t   | they occurred.                              |                       |  |  |  |  |
| 24    | Has   | any government   | tal unit notified you that                                    | you may be liable or potentially liable u   | nder or in violation of an environmental la | w?                    |  |  |  |  |
|       |   | No.  |   |   |   |                       |  |  |  |  |
|       | =   | Yes. Fill in the det   | tails   |   |   |                       |  |  |  |  |
|       | Ц   | res. I ili ili tile det  | talis.  | Governmental unit   | Environmental law, if you know it           | Date of notice        |  |  |  |  |
|       |   |  |   |   |   | 2410 01 1104100       |  |  |  |  |
| 25    | Hav   | e you notified an  | y governmental unit of a                                      | any release of hazardous material?  |   |                       |  |  |  |  |
|       |   | No.  |   |   |   |                       |  |  |  |  |
|       | =   |  | toilo   |   |   |                       |  |  |  |  |
|       | Ш   | Yes. Fill in the det   | lalis.  | Governmental unit   | Environmental law if you know it            | Date of notice        |  |  |  |  |
|       |   |  |   | Governmental unit   | Environmental law, if you know it           | Date of notice        |  |  |  |  |
| 26    | Hav   | e you been a par   | ty in any judicial or adm                                     | inistrative proceeding under any enviro   | onmental law? Include settlements and ord   | lers.                 |  |  |  |  |
|       | _   | NI-  |   |   |   |                       |  |  |  |  |
|       | =   | No.  |   |   |   |                       |  |  |  |  |
|       | Ш   | Yes. Fill in the det   | tails.  |   |   |                       |  |  |  |  |
|       |   |  |   | Court or agency   | Nature of the case                          | Status of the case    |  |  |  |  |
|       |   | 6  | Ab 4 V  |   |   |                       |  |  |  |  |
| Pa    | ırt 11  | Give Details   | About Your Business or C                                      | onnections to Any Business  |   |                       |  |  |  |  |
| 27    | With  | hin 4 years before   | e you filed for bankrupto                                     | cy, did you own a business or have any  | of the following connections to any busin   | ess?                  |  |  |  |  |
|       |   | ☐A sole proprie  | etor or self-employed in                                      | a trade, profession, or other activity, ei  | ther full-time or part-time                 |                       |  |  |  |  |
|       | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time           |  |   |   |   |                       |  |  |  |  |
|       | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)                                  |  |   |   |   |                       |  |  |  |  |
|       | A partner in a partnership  |  |   |   |   |                       |  |  |  |  |
|       | An officer, director, or managing executive of a corporation  |  |   |   |   |                       |  |  |  |  |
|       | An owner of at least 5% of the voting or equity securities of a corporation   |  |   |   |   |                       |  |  |  |  |
|       | □ No. Near of the phase conflict. Code Bod 40   |  |   |   |   |                       |  |  |  |  |
|       | No. None of the above applies. Go to Part 12.   |  |   |   |   |                       |  |  |  |  |
|       |   | Yes. Check all tha   | at apply above and fill in t                                  | the details below for each business.  |   |                       |  |  |  |  |
|       |   |  |   |   |   |                       |  |  |  |  |
|       |   |  |   |   |   |                       |  |  |  |  |
|       |   |  |   |   |   |                       |  |  |  |  |
|       |   |  |   |   |   |                       |  |  |  |  |

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| Debtor 1 | Krystin                   | Naomi                 | Gooden  | Case Number (if known)                           |
|----------|---------------------------|-----------------------|---|--|
|          | First Name                | Middle Name           | Last Name                                       |  |
|          | Krystin Gooden, 695       | 1 S. Oglesby,         | Describe the nature of the business             | Employer Identification number                   |
|          | Apt. 2C, Chicago, IL,     | , 60649               |   | Do not include Social Security number or         |
|          |                           |                       | Hair Styling                                    | FIN. Mono  |
|          |                           |                       |   | EIN: None  |
|          |                           |                       |   |  |
|          |                           |                       | Name of accountant or bookkeeper                | Dates business existed                           |
|          |                           |                       | None  | 2000   |
|          |                           |                       |   | 2006-present                                     |
|          |                           |                       |   |  |
|          |                           |                       |   |  |
|          |                           |                       | tcy, did you give a financial statement to any  | rone about your business? Include all financial  |
| ins      | stitutions, creditors,    | or other parties.     |   |  |
|          | No.                       |                       |   |  |
|          | Yes. Fill in the detai    | ls.                   |   |  |
|          |                           |                       | Date issued                                     |  |
| Part 1   | 2. Sign Below             |                       |   |  |
|          | oigii Below               |                       |   |  |
| 18 L     | J.S.C. §§ 152, 1341, 1    | 519, and 3571.        | sult in fines up to \$250,000, or imprisonment  |  |
| Х        | /s/ Krystin Naom          |                       | <u> </u>  |  |
|          | Signature of Debtor       | · 1                   | Signature of Debto                              | r 2  |
|          |                           |                       |   |  |
|          | Date 10/24/2016 MM / DD / |                       | Date  |  |
|          | MM / DD /                 | YYYY                  | MM / DD /                                       | YYYYY  |
|          |                           |                       |   |  |
| Did      | you attach additiona      | al pages to Your Stat | ement of Financial Affairs for Individuals Fili | ing for Bankruptcy (Official Form 107)?          |
|          | Na                        |                       |   |  |
| _        | No                        |                       |   |  |
| Ш        | Yes                       |                       |   |  |
| Did      | you pay or agree to       | pay someone who is    | not an attorney to help you fill out bankrupt   | cy forms?  |
|          |                           |                       |   |  |
|          | No                        |                       |   |  |
| П        | Yes. Name of perso        | .m                    | Λ.  | ttach the Bankruptcy Petition Preparer's Notice, |
|          |                           | '''                   | A   | Declaration and Signature (Official Form 119)    |

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In r                          | ·e   |                    |                        |                      |                     |  |                    |               |                     |            |
|-------------------------------|--|--------------------|------------------------|----------------------|---------------------|--|--------------------|---------------|---------------------|------------|
| Krystin Naomi Gooden / Debtor |  |                    |                        |                      |                     |  |                    | Case No:      |                     |            |
|                               |  |                    |                        |                      |                     |  |                    | Chapter:      | Chapter 13          |            |
|                               |  |                    |                        | DISCL                | OSURE OF CO         | MPENSATION (   | OF ATTORNEY        | FOR DEF       | BTOR                |            |
|                               | npensat  | tion pai           | d to me w              | ithin one year be    | fore the filing of  | b), I certify that I the petition in ban in plation of or in control of the contr | kruptcy, or agree  | ed to be paid | d to me, for servi  | ices       |
|                               | For l  | legal se           | rvices, I ha           | ave agreed to acc    | ept                 | \$4,000.00   |                    |               |                     |            |
|                               | Prior  | r to the           | filing of th           | nis statement I ha   | we received         | \$0.00   |                    |               |                     |            |
|                               | Balaı  | nce Du             | e                      |                      |                     | \$4,000.00   |                    |               |                     |            |
| 2.                            | The s  | source o           | of the com             | pensation paid to    | me was:             |  |                    |               |                     |            |
|                               |  | Debto              | r(s)                   | Other: (sp           | pecify              |  |                    |               |                     |            |
| 3.                            | The s  | source o           | of compens             | sation to be paid    | to me is:           |  |                    |               |                     |            |
|                               |  | Debte              | or(s)                  | Other: (sp           | necify              |  |                    |               |                     |            |
| 4.                            |  |                    | not agreed<br>aw firm. |                      | -                   | pensation with any   | y other person un  | nless they ar | re members and a    | associates |
|                               | Ш,   |                    | aw firm. A             |                      |                     | eation with a other with a list of the r   |                    |               |                     |            |
| 5.                            |  | urn for<br>includi |                        | -disclosed fee, I h  | have agreed to rer  | nder legal service   | for all aspects of | the bankru    | ptcy                |            |
|                               | a. A   | Analysi            | s of the de            | btor's financials    | situation, and ren  | dering advice to the   | he debtor in deter | rmining wh    | ether to file a pet | tition in  |
|                               | ł  | bankrup            | otcy;                  |                      |                     |  |                    |               |                     |            |
|                               | b. I   | Prepara            | tion and fi            | ling of any petition | on, schedules, sta  | tements of affairs   | and plan which     | may be req    | uired;              |            |
|                               | c. I   | Represe            | ntation of             | the debtor at the    | meeting of credit   | tors and confirma  | tion hearing, and  | any adjour    | ned hearings the    | reof;      |
|                               | d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; |                    |                        |                      |                     |  |                    |               |                     |            |
|                               | e. [Other provisions as needed]  |                    |                        |                      |                     |  |                    |               |                     |            |
| 6.                            | By ag  | greemer            | nt with the            | debtor(s), the ab    | ove-disclosed fee   | does not include   | the following se   | rvice:        |                     |            |
|                               |  |                    |                        |                      |                     |  |                    |               |                     |            |
|                               |  | Γ                  |                        |                      |                     | CEDTIFICATIO   | NT.                |               |                     | 1          |
|                               |  |                    | I certi                | fy that the forego   |                     | statement of any   |                    | angement f    | or                  |            |
|                               |  |                    | payment to             | 0                    |                     | _  |                    | Č             |                     |            |
|                               |  | ] :                |                        |                      | e debtor(s) in this | bankruptcy proce   |                    |               |                     |            |
|                               |  |                    | Date: 1 Date           | 0/24/2016            |                     | /s/ Mariusz Krzy<br>Signature of Atto  | <u> </u>           | _             |                     |            |
|                               |  |                    | 2000                   |                      |                     | ~.g 0j 1110  |                    |               |                     | 1          |

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Geraci Law L.L.C. Name of law firm

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



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- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



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- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307 (a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.



### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



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- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank]



### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4.000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$310.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date 1.0 14, 16

Signed:

Co-Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

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Date: 10/21/2016

Consultation Attorney:

Record #: 721-714

**Attorney - Client Agreement** 

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures.I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralegal will work on my case.

FEES: This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not paid prior to the case being filed shall be paid through the Chapter 13 Trustee. These fees are fixed, but the attorneys may apply to the court for additional fees if allowed by the CARA or other circumstances, such as extended evidentiary hearings, contested adversary proceedings or appeals. If the Court awards additional fees, they will also be paid through the Chapter13 Trustee. Fees are "flat fees" and "advance payment retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

No other work: Geraci Law is not representing me in state or other courts regarding creditors in my bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankrutpcy is my responsibility. Injury or other claims or property I must disclose any such claims or propery I now have or acquire after filing Chapter 13 to both the Chapter 13 trustee and to the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee.

months. The payment and length of the plan are based on the information I have provided, including income, expenses, assets and debts. If these amounts are not accurate, my plan payment or per month for duration may need to be increased. In addition, the Court, Chapter 13 Trustee or creditors could object to my proposed Chapter 13 payment, which may cause it to increase. I further understand that if my income or expenses change during my Chapter 13, my plan payment may have to change. I agree to read my petition and plan and study it before signing it so I know what is included, INCLUDING what I am listing as debts, what my property is, what my assets are and if they are claimed as exempt, and to make full disclosure.

My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; support obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement you listed; other secured debts including furniture, electronics, etc.; all other unsecured debts; other: My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed, including any association fees as long as the property is in my name; other Student loans: are usually NEVER paid 100% in a Chapter 13, but are paid the same percentage as unsecured creditors without interest, so my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so I have been told about this and I will deal with my student loans myself directly Debts not discharged if they not paid in full: student loans; educational debts; unfiled or late filed tax debts; undisclosed debts; support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge. Representation limited to Bankruptcy Court We do not represent you in state court, or in loan modifications or similar matters. If I am eligible to receive a tax refund during my Chapter 13, I understand I must turn it over to the Chapter 13 Trustee unless I am specifically advised that I do not need to. This may change on a yearly basis, so I must check with my attorneys every year. I also understand that if I receive any significant sums of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I MUST notify my attorney immediately and I may have to pay some or all of the funds into my Chapter 13 plan.

I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain current in a domestic support obligation fail to certify to the Court that I have remained current, or if I fail to take my financial management class, that my case may be glosed without a discharge, and I will be required to pay a fee to have it reopened.

(Joint Debtor)

the Debtor(s) Attorney fa

Representing Geraci Law L.L.C.

Dated: 10/21/16

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Krystin Naomi Gooden / Debtor

Bankruptcy Docket #:

Judge:

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 10/24/2016 /s/ Krystin Naomi Gooden

Krystin Naomi Gooden

X Date & Sign

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<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

#### UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Krystin Naomi

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 10/24/2016 | /s/ Krystin Naomi Gooden             |  |
|-------------------|--------------------------------------|--|
|                   | Krystin Naomi Gooden                 |  |
| Dated: 10/24/2016 | /s/ Mariusz Krzysztof Zatorski       |  |
|                   | Attorney: Mariusz Krzysztof Zatorski |  |

Form B 201A. Notice to Consumer Debtor(s) Record # 721714 Page 2 of 2

Case 16-34012 Doc 1 Filed 10/25/16 Entered 10/25/16 14:22:05 Docament Page 53 of 52 se Number (if known) Krystin Debtor 1 First Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) What kind of debts do 16. as "incurred by an individual primarily for a personal, family, or household purpose." you have? \_No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is ∏No. excluded and administrative expenses Yes. are paid that funds will be available for distribution to unsecured creditors? 1,000-5,000 **25,001-50,000** 1-49 How many creditors do 5,001-10,000 **50,001-100,000** you estimate that you 50-99 owe? 10,001-25,000 ■ More than 100,000 100-199 200-999 **□**\$500,000,001-\$1 billion \$0-\$50,000 \$1,000,001-\$10 million How much do you 19. □\$1,000,000,001-\$10 billion estimate your assets to \$50,001-\$100,000 \$10,000,001-\$50 million be worth? \$100,001-\$500,000 \$50,000,001-\$100 million ■\$10,000,000,001-\$50 billion ☐ \$500,001-\$1 million \$100,000,001-\$500 million ☐More than \$50 billion □\$500,000,001-\$1 billion \$0-\$50,000 ☐ \$1,000,001-\$10 million 20. How much do you \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities **\$50,001-\$100,000** □ \$50,000,001-\$100 million □ \$10,000,000,001-\$50 billion **\$100,001-\$500,000** ☐ More than \$50 billion ■ \$100,000,001-\$500 million ■ \$500,001-\$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Signature of Debtor 2

MM / DD / YYYY

Executed on

Case 16-34012 Doc 1 Filed 10/25/16 Entered 10/25/16 14:22:05 Desc Main Fill in this information to identify your case: Krystin Naomi Gooden Debtor 1 First Name Middle Name Debtor 2 (Spouse, if filing) Middle Name United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> Case Number Check if this is an (If known) amended filing Official Form 106 Dec **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Attach Bankruptcy Petition Preparer's Notice, Declaration, and Yes. Name of Person Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and Signature of Debtor 1 Signature of Debtor 2 MM / DD / YYYY

Case 16-34012 Doc 1 Page 55 of 59<sub>dse Number (if known)</sub> Dog waent Debtor 1 Krystin Naomi Middle Name Krystin Gooden, 6951 S. Oglesby, Describe the nature of the business Employer Identification number Do not include Social Security number or Apt. 2C, Chicago, IL, 60649 Hair Styling EIN: None Name of accountant or bookkeeper None 2006-present Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details. Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 MM / DD / YYYY Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? . Attach the Bankruptcy Petition Preparer's Notice, Yes. Name of person Declaration, and Signature (Official Form 119).

- "divorce decree or court order are not dischargable. Priority support debts must be paid in not be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor, No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors.
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 66 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- +2. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 🖒 MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17: AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCURATE!!!!

Krystin Naomi Gooden

X Date & Sign

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### UNITED STATES BANKEUFTCY COURT

#### NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

Krystin Naomi Gooden / Debtor

Bankruptcy Docket #:

Judge:

#### VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

Krystin Naomi Gooden

X Date & Sign

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 10 / 24 /2016

rystin Naomi Gooden

X Date & Sign

Dated: 10 12 / 12016

Attorney: Mariusz Krzysztof Zatorski

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Part 4:

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Krystin Naomi Gooden

Date: 0 / 24/12016

If you checked line 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.